


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 MAR -9 11 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000158092

1. Corporation Name

San Isidro Drywall Installer, Inc.

400067966234
03/16/06--01013--012 **8.75

2. Principal Office Address
30208 Double Drive

3. Mailing Office Address
30208 Double Drive

Suite, Apt. #, etc.

City & State
Wesley Chapel, FL

City & State
Wesley Chapel, FL

Zip Country
33544 Pasco

Zip Country
33544 Pasco

4. Date Incorporated or Qualified To Do Business in Florida

5. EEL Number
562427695

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

REINSTATEMENT 04/06

7. Name and Address of Current Registered Agent

Name
Cortez-Flores, Jose J.

Street Address (P.O. Box Number is Not Acceptable)
30208 Double Drive

Suite, Apt. #, Etc.

City
Wesley Chapel

State Zip Code
FL 33544

400067966234
03/16/06--01013--013 **38.75

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent *Jose J. Cortez-Flores* Date 02-02-2006

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|--------|-----------------------------------|--|-------------------------|
| P | Jose J. Cortez-Flores | 30208 Double Drive | Wesley Chapel, FL 33544 |
| V | Felipe Gomez-Diaz | 14411 Sreneec Court Apt: E4 | Tampa, FL 33613 |
| M | Marcos De la Cruz | 14401 De Lores Court Apt: A3 | Tampa, FL 33613 |
| | | | |
| | | | |
| | | | |

400067966234
03/16/06--01013--014 **900.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *Jose J. Cortez-Flores* Jose J. Cortez-Flores 02-02-2006 813-714-6631

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

B. Mitchell MAR 13 2006