PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

3.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

P95000014015

FILED
97 SEP 15 PM 3:3?
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P95000014015

1. Corporation Name

General Construction Corp.

Principal Place of Business	Mailing Address
1647 Wiley Street Hollywood, FL 33020	

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
N/A	N/A
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: February 17, 1995

5. FEI Number: 65-0565413 ☐ Applied For ☐ Not Applicable

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

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres.	Elizabeth Ann Pasternak	1647 Wiley Street	Hollywood, FL 33020
V. Pres.	Peter Dacko	1647 Wiley Street	Hollywood, FL 33020
		REINSTATEMENT 96-97	
		Chg	
		$5	

8. Name and Address of Current Registered Agent

Elizabeth Ann Pasternak
1647 Wiley Street
Hollywood, FL 33020

9. Name and Address of New Registered Agent

Name: N/A VS SEP 1 9 1997

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

Suite, Apt. #, Etc.

City: State: FL Zip Code:

200002298252--1
-09/19/97--01087--001
*****923.75 *****923.75

CR2E040 (12/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Elizabeth A Pasternak
REGISTERED AGENT MUST SIGN

Date: 9-2-97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☑

(See other side for information on intangible tax.)

12. 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 under section 119.07(3)(i), 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: Elizabeth A Pasternak Elizabeth A. Pasternak 9-2-97 954-926-6605
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #