

FROM HILL, WARD, HENDERSON, P.A.

(TUE) 4. 3' 01 14:00/ST. 13:53/NO. 4260294956 P 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 APR -3 PM 2:47

DOCUMENT # P97000039617

1. Corporation Name

ATLANTIC CONSTRUCTION INC OF TAMPA

2. Principal Office Address

715 Sandy Creek Road

3. Mailing Office Address

715 Sandy Creek Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Brandon, Florida

City & State

Brandon, Florida

Zip

33511

Country

USA

Zip

33511

Country

USA

REINSTATEMENT 98-01

4. Date Incorporated or Qualified
To Do Business in Florida

05/01/97

5. FEI Number

59-3442215

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Khosrow Jabbari

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

715 Sandy Creek Road

Suite, Apt. #, Etc.

City

Brandon

State

FL

Zip Code

33511

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

[Signature]
REGISTERED AGENT MUST SIGN Khosrow Jabbari

Date

4/3/01

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
Pres.	Khosrow Jabbari	3601 W Kensington Tampa Florida 33629	Tampa Florida 33629
VP	Farhad Jabbari	3601 W Kensington	Tampa Florida 33629
Sec.	Najes Jabbari	3601 W Kensington	Tampa Florida 33629

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 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/3/01

Daytime Phone #

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

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(((H01000033515 7)))

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To:

Division of Corporations
Fax Number : (850) 922-4004

From:

Account Name : HILL, WARD & HENDERSON, P.A. II
Account Number : 072100000520
Phone : (813) 221-3900
Fax Number : (813) 221-2900

CORPORATION REINSTATEMENT

ATLANTIC CONSTRUCTION INC OF TAMPA

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$1,208.75