
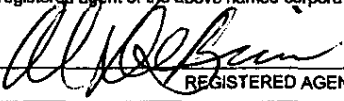



PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																													
DOCUMENT # 552296																																	
1. Corporation Name DeBrino Caulking and Waterproofing, Inc.																																	
2. Principal Office Address 4700 N. State Rd. 7		3. Mailing Office Address 4700 N. State Rd. 7		FILED 02 FEB -1 PM 1:41 SECRETARY OF STATE TALLAHASSEE, FLORIDA  800004912208--0 -02/12/02--01065--012 ****300.00 ****300.00																													
Suite, Apt. #, etc. A106		Suite, Apt. #, etc. A106																															
City & State Lauderdale Lakes, FL		City & State Lauderdale Lakes, FL																															
Zip 33319		Country USA																															
				4. Date Incorporated or Qualified To Do Business in Florida 12/01/1977																													
				5. FEI Number 59-1804493																													
				Applied For Not Applicable																													
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status																													
7. Name and Address of Current Registered Agent																																	
Name AL DeBrino																																	
Street Address (P.O. Box Number is Not Acceptable) 1194 Hillsboro Mile																																	
Suite, Apt. #, Etc. 10																																	
City Hillsboro Beach				State FL	Zip Code 33062																												
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 				Date 1/25/02																													
REGISTERED AGENT MUST SIGN																																	
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)																																	
<table border="1"><thead><tr><th>Titles</th><th>Name of Officers and/or Directors</th><th>Street Address of Each Officer and/or Director</th><th>City / State / Zip</th></tr></thead><tbody><tr><td>P</td><td>Albert DeBrino</td><td>1194 Hillsboro Mile</td><td>Hillsboro Bch, FL 33062</td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr></tbody></table>						Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	P	Albert DeBrino	1194 Hillsboro Mile	Hillsboro Bch, FL 33062																				
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01-02 UBR 1178																																	
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:  AL DeBrino 1/25/02 954-731-3135																																	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																	

CR2E081 (9/01)

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# DeBRINO CAULKING & WATERPROOFING, INC.



THE PROFESSIONAL WATERPROOFING COMPANY

January 25, 2002

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

Re: DeBrino Caulking and Waterproofing, Inc.  
552296  
Reinstatement application

To Whom It May Concern:

This is to inform you that we did not receive a renewal notice due to a change of address and is requesting that the fees for reinstatement be waived. Enclosed please find a check in the amount of \$300.00 to cover the filing fees for 2001 and 2002 with a completed application. Should you need more information, please contact me at 954-731-3135.

Yours truly,

Al DeBrino  
President

Enclosures