

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 264971

1. Corporation Name

Inland Industrial Contractors, Inc.

2. Principal Office Address
2101 Maryland Circle3. Mailing Office Address
2101 Maryland Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee, FL

City & State

Tallahassee, FL

Zip

32303

Country

Leon

Zip

32303

Country

Leon

4. Date Incorporated or Qualified
To Do Business in Florida 12/01/625. FEI Number
590994418Applied For
Not Applicable6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CT Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State
FLZip Code
33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 817.0505, F.S.

Signature of
Registered Agent*Derek Whipple*
REGISTERED AGENT MUST SIGN

Date 12/29/04

Derek Whipple, Asst. Secretary

9. Name 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
Dir	Larry L. Magelitz	1335 Lerida Way	Pacific, CA 94044
Pres.	Larry L. Magelitz	1335 Lerida Way	Pacific, CA 94044
Sec.	Larry L. Magelitz	1335 Lerida Way	Pacific, CA 94044
Treas.	Larry L. Magelitz	1335 Lerida Way	Pacific, CA 94044
VP	Thomas D. Skinner	P.O. Box 38303	Tallahassee, FL 32315-8303
Asst. Treas.	Robin D. Peoples	5491 Florida Drive	Concord, CA 94521

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 807 or 817, 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 807.0401 or 817.0401, 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)(b), 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:

Larry L. Magelitz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Larry L. Magelitz

November 16 2004 (925) 249-8851

Date

Daytime Phone #

292

Florida Department of State
Division of Corporations
Public Access System

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From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 222-9428

CORPORATION REINSTATEMENT

INLAND INDUSTRIAL CONTRACTORS, INCORPORATED

Certificate of Status	0
Certified Copy	0
Page Count	or 2
Estimated Charge	\$900.00

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Corporate Filing

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