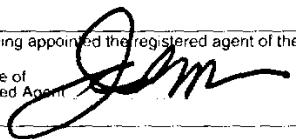
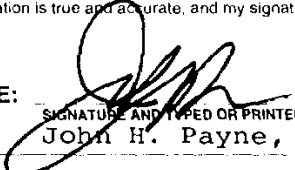


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # .267647		W99-2384	
1. Corporation Name FISHER-PAYNE CONSTRUCTION CO., INC.			
Principal Place of Business 700 NE 40TH COURT Oakland Park, FL. 33324		Mailing Address 1612 SE 9th Street Ft. Lauderdale, FL. 33316	
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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		4. Date Incorporated or Qualified To Do Business in Florida 03/04/63	
		5. FEI Number 59-1007478	
		Applied For <input type="checkbox"/> Not Applicable	
		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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
P	Husband, Joseph E.	700 NE 40th Court	Oakland Park, FL. 33334
V/D	Payne, John H.	700 NE 40th Court	Oakland Park, FL. 33334
V	Payne, Michael H.	700 NE 40th Court	Oakland Park, FL. 33334
S/T	Formato, D. A.	700 NE 40th Court	Oakland Park, FL. 33334
			800002778508--0 -02/17/99--01080--016 ****158.00 ****158.00
8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
John H. Payne 700 NE 40th Court Oakland Park, FL. 33334		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code	
		800002778508--0 -02/17/99--01080--017 ****158.75 ****158.75 FL	
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 		Date 1/25/99	
REGISTERED AGENT MUST SIGN			
11. This corporation owes or has paid the current year • Intangible Personal Property tax due June 30. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR John H. Payne, Director		1/25/99 (954) 473-9772 Daytime Phone #	

CPRE040 (1/98)