


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION REINSTATEMENT**



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

**FILED**  
00 SEP 27 AM 10:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 411982  
1. Corporation Name  
Terra Excavating, Inc.  
13400 Pine Street S.W.  
Largo, Florida 33774

2. Principal Office Address Terra Excavating, Inc. Suite, Apt. #, etc. 13400 Pine St. S.W. City & State Largo, FL Zip 33774		3. Mailing Office Address Terra Excavating, Inc. Suite, Apt. #, etc. 13400 Pine St. S.W. City & State Largo, FL Zip 33774	
Country U.S.A.		Country U.S.A.	

**REINSTATEMENT** 2/00

4. Date Incorporated or Qualified To Do Business in Florida 1972

5. FEI Number 59-1432029 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED  \$9.75 Additional Fee required for Certificate of Status

7. Name and Address of Current Registered Agent

Name: Mohammad Adnan Rahman  
Street Address (P.O. Box Number is Not Acceptable): 13400 Pine St. S.W.  
Suite, Apt. #, Etc.:  
City: Largo  
State: FL Zip Code: 33774

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  
Date: 9-26-00

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.	Mohammad D.A. Rahman	8840 9th St. N.	St Petersburg, Fl. 33702
Sec.	Hikman A. Rahman	3137 Carlos Dr.	Dunedin, Fl. 33693

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)(f), 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] President 9-26-00 727-581-1598  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (9/99)