

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 18 PM 2:34

DOCUMENT # F 78927

1. Corporation Name

ELITE GENERAL CONTRACTORS, INC.

2. Principal Office Address

192 PARK PLACE

Suite, Apt. #, etc.

City & State

JUPITER, FL

Zip

Country

33458-7562 PALM BEACH

3. Mailing Office Address

P.O. Box 32878

Suite, Apt. #, etc.

City & State

P.B. GARDENS, FL

Zip

Country

33420-2878 PALM BEACH

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

04-27-1982

5. FEI Number

59-2199385

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

YIZY WEINGARTEN

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

192 PARK PLACE

Suite, Apt. #, Etc.

City

JUPITER

State

FL

Zip Code

33458-7562

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

Yizy Weingarten
REGISTERED AGENT MUST SIGN

Date APRIL 13, 2001

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
P/T/S V/D/C	YIZY WEINGARTEN	192 PARK PLACE	JUPITER, FL. 33458-7562

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:

Yizy Weingarten
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

APRIL 13, 2001 (561) 622-2212

Daytime Phone #

CR2E081 (9/00)