PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

96 DEC 26 PM 3:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F95000003636**

1. Corporation Name

MIDWEST STEEL ERECTION, INC.

Principal Place of Business	Mailing Address
1604 E. AVIS MADISON HEIGHTS MI 48071	1604 E. AVIS MADISON HEIGHTS MI 48071

000002046040--8
-01/03/97--01182--004
****375.00 ****375.00

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
2525 E. Grand Blvd.	2525 E. Grand Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Detroit, MI	City & State: Detroit, MI
Zip 48211 Country	Zip 48211 Country

4. Date Incorporated or Qualified To Do Business in Florida: 07/26/1995

5. FEI Number: 38-2871555 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $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
ST	SMITH, SHELDON D	1604 E. AVIS 2525 E. Grand Blvd.	MADISON HEIGHTS MI 48071 Detroit, MI 48211
VD	ANDERSON, KIP D	1604 E. AVIS 2525 E. Grand Blvd.	MADISON HEIGHTS MI 48071 Detroit, MI 48211
P	BROAD, GARY	1604 E. AVIS 2525 E. Grand Blvd.	MADISON HEIGHTS MI 48071 Detroit, MI 48211

REINSTATEMENT 1996

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City | State: FL | Zip Code

12/26/96

CR2E040 (7/95)

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: Tanya M. Villar — Date: 12-18-96

TANYA M. VILLAR
REGISTERED AGENT ASSISTANT SECRETARY

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (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: _____ 10/9/96 Date 810-589-9900 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sheldon Smith

0099115 AP