## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		03 JUN -2 AM 8: 02 SECHETARY OF STATE TALLAMASSEE, FLORIDA		
DOCUMENT # F9900000628  1. CORPORATION NAME  CORESLAB STRUCTURES (COLUMBIA), INC.				di di c	
2. Principal Office Address 9790 GARNERS FERRY ROAD	RS FERRY ROAD P.O. BOX 9405			Çi.	
Suite, Apt. #, etc  City & State	City & State		4. Date Incorpora To Do Busines	iteDor Qualified is in Florida FEB. IS	, 1978
HOPKINS, SC	COLUMBIA ,	SC	5. FEI Number	0664197	Applied For
Zip Country	Zip	Country	6.	co -c	Not Applicable  Additional Fee required
29661 US	29290	<i>U</i> 5	CERTIFICATE OF		Certificate of Status
Street Address (P.O. Box Number is Not Acceptable)  1200 SOUTH PINE ISLAND ROAD  Suite, Apt. #, Etc.  City PLANTATION  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  REGISTERED AGENT MUST SIGN ASSISTANT SECRETARY  Date May 19, 2003					
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
VP/ ALAN BOATWRIGHT	9790	) chrners feri	GAOS PS	HOPKINS , SC 3	9026
			80C -06/02/03	10203068 3 01052 004	4.8 **458.75
		· · · · · · · · · · · · · · · · · · ·		, , , , , , , , , , , , , , , , , , ,	
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 filling 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  Date  Daytime Phone #					

gr 6/3



May 27, 2003

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Enclosed is a Corporation Reinstatement form and a check in the amount of \$458.75. Coreslab Structures (Columbia), Inc. was dissolved in 2001 as a Foreign Profit Corporation. No letter of warning or notice of the dissolvement was received by our company at any time during the years 2001, 2002 or 2003. Therefore, we are sending a check in the amount of \$450.00 for the annual \$150.00 Uniform Business Report filing fee for the years 2001, 2002 and 2003 and \$8.75 for a Certificate of Status. Please update our Foreign Profit Corporation status. If you need any further information, please contact me @ (803) 783-5460.

Thank you,

Jennifer Boyd
Account Associate