

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

AND FILED

98 OCT 30 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G-57294

1. Corporation Name
DANIEL HOOPER CONSTRUCTION INC
114 NORTHMOOR RD
CASSELBERRY FL 32707

Mailing Address Principal Place of Business
114 NORTHMOOR RD
CASSELBERRY FL 32707

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Mailing Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 97-98

4. Date Incorporated or Qualified To Do Business in Florida

8/19/83

5. FEI Number

59-2324757

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
PO	DANIEL B HOOPER.	114 NORTHMOOR RD	CASSELBERRY FL 32707
SD	ROBEA HOOPER	114 NORTHMOOR RD	CASSELBERRY FL 32707

000002678688 G
-11/03/98--01028--001
***300.00 ***300.00

10/16/98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DANIEL B HOOPER
114 NORTHMOOR Rd.
CASSELBERRY FL 32707

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Daniel B Hooper

REGISTERED AGENT MUST SIGN

Date

10/29/98

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box (See other side for additional information.)

12. 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.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Daniel B Hooper

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/29/98

Date

Daytime Phone #

CR2E040 (6/94)