

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 JUN 25 PM 3:20

DOCUMENT #

J88485

1. Corporation Name

COLOMBO CONSTRUCTION, INC.

2. Principal Office Address

2944 OCEANSHORE BLVD

3. Mailing Office Address

555 WEST GRANADA BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE G-10

City & State

ORMOND BEACH, FL.

City & State

ORMOND BEACH, FL.

Zip

32176

Country

VOL

Zip

32174

Country

VOL

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

8/20/87

5. FEI Number

59-2846906

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

Dale J. Abbott, CPA

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

555 West Granada Boulevard

Suite, Apt. #, Etc.

Suite G-10

City

Ormond Beach

State
FL

Zip Code

321749409

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**

Dale J. Abbott
REGISTERED AGENT MUST SIGN

Date

6/20/01

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 |
|--------|--------------------------------------|---|--|
| VD | Yolanda Colombo | 2944 Oceanshore Blvd | Ormond Beach, FL 32176 |
| | | | 500004458315-6 -07/03/01--01070--017 ****150.00 ****150.00 |
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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:

Yolanda Colombo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5-8-01

Daytime Phone #

CR2E081 (9/00)