


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT
 09-2000



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # K04174

1. Corporation Name
 G.P.I. Roofing Systems, Inc.

2. Principal Office Address
 11528 Wiles Road
 Suite, Apt. #, etc.

3. Mailing Office Address
 11528 Wiles Road
 Suite, Apt. #, etc.

City & State
 Coral Springs, FL

City & State
 Coral Springs, FL

Zip Country
 33076 Broward

Zip Country
 33076 Broward

FILED
 00 JAN 21 PM 3:57
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

REINSTATEMENT 09-2000

4. Date Incorporated or Qualified To Do Business in Florida
 NOV. 30, 1987

5. FEI Number
 65-0069176

6. CERTIFICATE OF STATUS DESIRED

7. Name and Address of Current Registered Agent

Name
 GRANTHAM, Wiley III

Street Address (P.O. Box Number is Not Acceptable)
 11528 Wiles Road.

Suite, Apt. #, Etc.

City
 Coral Springs, FL

State Zip Code
 FL 33076

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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
 Wiley Grantham III

REGISTERED AGENT MUST SIGN

Date
 1/14/2000

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
PRESIDENT	Grantham, Wiley III	3661 N.W. 114 Ave.	Coral Springs, FL 33066
V. President	Grantham, Vanessa	3661 N.W. 114 Ave.	Coral Springs, FL 33066

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)(l), 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: Wiley Grantham III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date
 1/14/2000

Daytime Phone #
 954 755-6257