

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 DEC 21 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K12220

1. Corporation Name

OLIVE BROTHERS
ROOFING INC

100082357891
12/07/06--01033--006 **\$300.00

2. Principal Office Address

7079 SW 46st

3. Mailing Office Address

7079 SW 46st

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami FL

Zip

33155

Country

US

Zip

33155

Country

US

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

1/15/88

5. FEI Number

650065389

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

Daniel L. Olive

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

7079 SW 46st

Suite, Apt. #, Etc.

City

Miami FL

State

FL

Zip Code

33155

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

Daniel L. Olive

REGISTERED AGENT MUST SIGN

Date

12/6/06

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
Pres	Daniel L Olive	6810 SW 48 Terr	MIAMI FL 33155

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 contained in Chapter 119, 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:

Daniel L Olive

Daniel L. Olive 12/6/06

(305) 261-0071

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DEC 21 2006

DEC 21 2006

2002

OLIVE BROTHERS ROOFING
6525 SW 110 AVE
MIAMI, FL 33173
(305) 261-0071

DECEMBER 6, 2006

ATTN: FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS.
2661 EXECUTIVE CENTER CIRCLE
TALLAHASSEE, FL 32301

RE: OLIVE BROTHERS ROOFING
7079 SW 46 ST
MIAMI, FL 33155
DOCUMENT # K12220

TO WHOM IT MAY CONCERN,

WE HAVE NOT RECEIVED ANY ANNUAL RENEWAL NOTIFICATION FOR THE
YEAR 2005 AND ARE REQUESTING A WAIVER OF ANY PENALTIES.

SINCERELY,

Dan Olive

DAN OLIVE
OLIVE BROTHERS ROOFING.