

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Jim Smith**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
02 OCT -9 PM 12:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** K34840

1. Corporation Name

LA PALMA CONSTRUCTION, INC.

2. Principal Office Address

C/O CARMELO ROSARIO

Suite, Apt. #, etc.

961 PELICAN BAY DR

City & State

DAYTONA BEACH, FL

Zip

32119

Country

USA

3. Mailing Office Address

C/O CARMELO ROSARIO

Suite, Apt. #, etc.

961 PELICAN BAY DR

City & State

DAYTONA BEACH, FL

Zip

32119

Country

USA

REINSTATEMENT 02

4. Date Incorporated or Qualified To Do Business in Florida

09/28/1988

5. FEI Number

59-2917939

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

CARMELO ROSARIO

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

961 PELICAN BAY DR

Suite, Apt. #, Etc.

City

DAYTONA BEACH, FL 32119

State  
FL

Zip Code

32119

300008286053 --4  
-10/09/02--01046--001  
\*\*\*750.00 \*\*\*750.00

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

*Carmelo Rosario*

REGISTERED AGENT MUST SIGN

Date 10/07/02

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      |
|--------|-----------------------------------|--|-------------------------|
| V      | JAMES GRAY                        | 1002 CELERY AVE                                | SANFORD FL              |
| P      | CARMELO ROSARIO                   | 961 PELICAN BAY DR                             | DAYTONA-BEACH, FL 32119 |
|        |                                   |  |                         |
|        |                                   |  |                         |
|        |                                   |  |                         |

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)(f), 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:

*Carmelo Rosario*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/07/02

Date

386-532-1644

Daytime Phone #

CR2E081 (8/01)