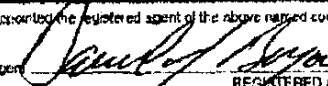
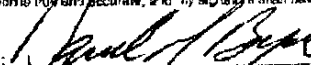


8/10/2004 11:41 AM FROM: Fax Florida Incorporators, Inc. TO: 18502050384 PAGE 1 OF 002

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L67103			
1. Corporation Name J. BRYAN'S CONSTRUCTION, INC.			
2. Principal Office Address 3910 BUTTONWOOD COURT Suite, Apt. #, etc.		3. Mailing Office Address 3910 BUTTONWOOD COURT Suite, Apt. #, etc.	
City & State BRANDON FL		City & State BRANDON FL	
Zip 33511	Country	Zip 33511	Country
4. Date Incorporated or Qualified To Do Business in Florida 04/20/1990		5. FEI Number 592998187	
6. CERTIFICATE OF STATUS DESIRED ☒		7. Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent:			
Name BRYAN, DARREL J.			
Street Address (P.O. Box Number is Not Applicable) 3910 BUTTONWOOD COURT			
Suite, Apt. #, Etc.			
City BRANDON		State FL	Zip Code 33511
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the duties of section 607.0505 or 617.0513, F.S.			
Signature of Registered Agent 		Date 8/10/04	
REGISTERED AGENT MUST SIGN			
9. Name and Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officer and/or Director	Street Address of Each Officer and/or Director	City / State / Zip
P	BRYAN, DARREL J	3910 BUTTONWOOD COURT	BRANDON FL 33511
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(9)(b), F.S. The information included on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.			
SIGNATURE: 		DARREL J. BRYAN, PRESIDENT	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 8/10/04	Daytime Phone # 813-545-1711

Florida Incorporators, Inc., 8875 Hidden River Pkwy Ste 300
Tampa, FL 33637 (813) 632-7882

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : FLORIDA INCORPORATORS, INC.
Account Number : 075350000473
Phone : (305) 379-7907
Fax Number : (305) 402-3141

CORPORATION REINSTATEMENT

J.BRYAN'S CONSTRUCTION, INC.

Certificate of Status	1
Certified Copy	0
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