


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT #</b> <i>N-96000005362</i>			
<b>1. Corporation Name</b> <b>R.B. Stucco Services, Inc.</b>			
<b>2. Principal Office Address</b> 704 14th Street East Suite, Apt. #, etc.		<b>3. Mailing Office Address</b> 704 14th Street East Suite, Apt. #, etc.	
<b>City &amp; State</b> Palmetto, Florida		<b>City &amp; State</b> Palmetto, Florida	
<b>Zip</b> 34221	<b>Country</b> USA	<b>Zip</b> 34221	<b>Country</b> USA

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 DIVISION OF CORPORATIONS

**REINSTATEMENT 9705**

<b>4. Date Incorporated or Qualified To Do Business in Florida</b> 10-18-96	
<b>5. FEI Number</b> 650710954	Applied For Not Applicable
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

<b>7. Name and Address of Current Registered Agent</b>		
<b>Name</b> Mr. Robert Bing, Sr.		
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 704 14th Street East		
<b>Suite, Apt. #, Etc.</b>		
<b>City</b> Palmetto, Florida	<b>State</b> FL	<b>Zip Code</b> 34221

**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

*Robert Bing Sr.*

REGISTERED AGENT MUST SIGN

Date *6-24-05*

**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
DPT	Robert Bing, Sr.	704 14th St. E.	Palmetto, FL 34221
DV	Robert Bing, Jr.	704 14th St. E.	Palmetto, FL 34221
Sec	John Felton	704 14th St. E.	Palmetto, FL 34221
AD	Edward L. Jenkins	704 14th St. E.	Palmetto, FL 34221
AD	Richard Reave	704 14th St. E.	Palmetto, FL 34221
AD	Bryant Tarver	704 14th St. E.	Palmetto, FL 34221

**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.**

*Edward Jenkins Robert Bing Sr.*

SIGNATURE:

*John Felton Robert L. Bing Jr.*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Richard Reave*

*Brian Turner*  
 (941) 704-2044

Date

Daytime Phone #