

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 DEC 16 PM 12:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000011330

1. Corporation Name

Global Construction Services, Inc.

700025513007  
12/16/03--01012--010 \*\*150.00

2. Principal Office Address

2980 W. 84 Street

Suite, Apt. #, etc.

#11

3. Mailing Office Address

6135 NW 174 Ter

Suite, Apt. #, etc.

City & State

Hialeah, FL

City & State

Miami Lakes, FL

Zip

33018

Country

USA

Zip

33015

Country

USA

REINSTATEMENT 03

4. Date Incorporated or Qualified  
To Do Business in Florida

1-27-2000

5. FEI Number

65-0978569

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

Tom Pendas

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

6135 NW 174 Ter

Suite, Apt. #, Etc.

City

Miami Lakes,

State

FL

Zip Code

33015

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date 12-11-03

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
DPTS	Tom Pendas	6135 NW 174 Ter	Miami Lakes, FL 33015

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.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-11-03 954-605-8155

Date

Daytime Phone #

CR2E081 (10/02)

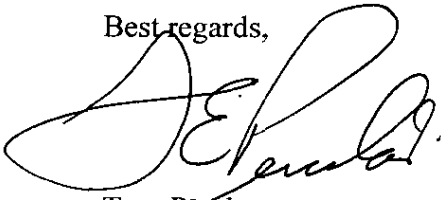
December 11, 2003

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

I am attaching this letter along with the corporate reinstatement form, as requested by the telephone consultant I spoke to in your office today. Your consultant informed that your correspondence was sent to our old office address, which we vacated over a year ago. I apologize for not inquiring about the annual report filling earlier; but my office manager, who had normally prepared these documents for me left our company when we moved and I did not think of it until today when a client informed me that our company appeared inactive in the state website.

Best regards,

A handwritten signature in black ink, appearing to read 'Tom Pendas', written over a horizontal line.

Tom Pendas  
President

Global Construction Services, Inc.  
2980 West 84<sup>th</sup> Street, Suite 11  
Hialeah, FL 33018  
786.621.2285 Office  
954.605.8155 Mobile