

# 2004 FOR PROFIT CORPORATION REINSTATEMENT


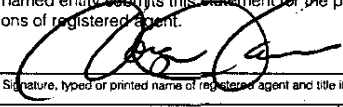


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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



10282004 REIN-P CR2E098 (6/04) **MRD**

<b>DOCUMENT # P00000033302</b>					
1. Entity Name CONSTRUCTION PROFESSIONAL MANAGEMENT, INC.					
Principal Place of Business 2400 NW 30 ST MIAMI, FL 33142			Mailing Address 2400 NW 30 ST MIAMI, FL 33142		
2. Principal Place of Business 12515 SW 88 STREET		3. Mailing Address 12515 SW 88 STREET			
Suite, Apt. #, etc. SUITE 324		Suite, Apt. #, etc. SUITE 324			
City & State MIAMI FLORIDA		City & State MIAMI FLORIDA		4. FEI Number 65-0996683	
Zip 33173	Country U S A	Zip 33173	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  JAEN, JORGE A 2400 NW 30 ST MIAMI, FL 33142			7. Name and Address of New Registered Agent Name JAEN JORGE A Street Address (P.O. Box Number is Not Acceptable) 12515 S.W. 88 Street Suite 324 City Miami FL Zip Code 33173		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		REGISTERED AGENCY  10/28/04			
FILE NOW!!! FEE IS \$750.00 After January 1, 2005, Fee will be \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST JAEN, JORGE A 2400 NW 30 ST MIAMI, FL 33142	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST JAEN, JORGE A 12515 SW 88 street suite 324 MIAMI FL 33173	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	000042746270 11/15/04--01048--003 **150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	REINSTATEMENT 04	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate, and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		JAEN JORGE A PRESIDENT 10/28/04 (305) 595-1960			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			

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**CONSTRUCTION PROFESSIONAL MANAGEMENT, INC**  
**12515 SW 88 ST SUITE 324**  
**MIAMI, FL. 33173**  
DOCUMENT # P00000033302

TO: FLORIDA DEPT OF STATE  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FL. 32314

RE: ANNUAL REPORT

GENTLEMEN:

IN PREVIOUS YEARS WE HAVE PAID THE ANNUAL REPORT ON TIME,  
BUT WE DID NOT RECEIVE ANY CORRESPONDENCE FROM YOUR  
DEPARTMENT AND THE PAYMENT WAS OVERLOOKED.

ENCLOSED IS THE PAYMENT OF \$150.00 USD FOR THE ANNUAL FEE.

THANK YOU FOR YOUR TIME. IF YOU HAVE ANY QUESTIONS PLEASE  
CONTACT US AT YOUR EARLIEST CONVENIENCE.

VERY TRULY

  
\_\_\_\_\_  
JEAN, JORSE A  
PRESIDENT