PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA FLORIDA DEPARTMENT OF STATE **CORPORATION** Katherine Harris REINSTATEMENT Secretary of State 04 MAR 17 PM 5: 03 DIVISION OF CORPORATIONS Mailing Office Address Nw Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified To Do Business in Florida City & State Applied For Not Applicable Country Zip Country \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED for a Certificate of Status 7. Name and Address of Current Registered Agent **700031289597** 03/26/04--01096--014 \*\*617.\$0 Street Address Not Acceptable) ሊን Suite, Apt. #, Etc. State Zip Code 33321 Amsona 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 \_ REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip 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. He reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees pen 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 curate, and my signature shall have the same legal effect as if made under oath. owed by the corporation have on this application is true and

Daytime Phone #

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

I Nathan Villar did not receive my first or second notice annual report (3003) for Empire Construction Group, Inc.

Doucie