

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION  
FOR  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
02 FEB 21 AM 11:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000072156

1. Corporation Name  
L & E CONSTRUCTION CONSULTING ENGINEERING, CORP.

Principal Place of Business Mailing Address  
~~12845 SW 189 Avenue~~  
~~Miami, FL 33177~~ same

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, if Applicable  
15263 SW 138 Terrace  
Suite, Apt. #, etc.

3. New Mailing Address, if Applicable  
15263 SW 138 Terrace  
Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida  
7/28/00

5. FEI Number Applied For  
65-1028026 Not Applicable

City & State  
Miami, FL 33196  
Zip Country  
USA

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Miami, FL 33196  
Zip Country  
USA

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P/S/D	Luis Villas	15263 SW 138 Terrace	Miami, FL 33196

600005072176--4  
-03/08/02--01011--001  
\*\*\*908.75 \*\*\*908.75

8. Name and Address of Current Registered Agent

Luis Villas  
15263 SW 138 Terrace  
Miami, FL 33196

9. Name and Address of New Registered Agent

Name  
\* same  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, Etc.  
City State Zip Code  
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent *Luis Villas* Date 2/7/02  
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No  (See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: *Luis Villas* Date 2/7/02 Daytime Phone # 954-777-3980  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR26640 (12/95)