

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CLERK OF SUPERIOR COURT
CLERK OF SUPERIOR COURT

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P00000082842

1. Corporation Name

Y&A Construction, Inc

700004795487--3

-01/25/02--01011--003

****700.00 ****700.00

700004795487--3

-01/25/02--01011--004

****200.00 ****200.00

2. Principal Office Address

10370 sw 220 st

3. Mailing Office Address

10370 sw 220 st

Suite, Apt. #, etc.

apt # 215

Suite, Apt. #, etc.

apt # 215

City & State

miami fl

City & State

miami fl

Zip

33190

Country

Date

Zip

33190

Country

Date

REINSTATEMENT 01-02

4. Date Incorporated or Qualified
To Do Business in Florida

08/31/00

5. FEI Number

65-1036657

*

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$5.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Yalbiz salazar

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

10370 sw 220 st

Suite, Apt. #, Etc.

apt # 215

City

miami

State
FL

Zip Code

33190

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

YALBIZ SALAZAR

01/10/02

Date

REGISTERED AGENT MUST SIGN

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
P	Yalbiz Salazar	10370 sw 220 st	miami fl 33190
V	Ariel Leon	10370 sw 220 st	miami fl 33190

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)(f), 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:

YALBIZ SALAZAR

01/10/02

(305)219-5557

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #