

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 OCT -3 AM 9:58

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000 108915

1. Corporation Name

Omni Construction of Bay County, Inc.

REINSTATEMENT 03

400023546664  
10/03/03--01069--007 \*\*150.00

2. Principal Office Address

308 Moonlight Bay Dr.

Suite, Apt. #, etc.

City & State

Panama City Beach, FL

Zip

32407

Country

USA

3. Mailing Office Address

PO Box 9022

Suite, Apt. #, etc.

City & State

Panama City Beach, FL

Zip

32417

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

11/22/2000

5. FEI Number

59-3696691

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

JOSEPH MODZEL

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

308 MOONLIGHT BAY DRIVE

Suite, Apt. #, Etc.

City

PANAMA CITY BEACH.

State

FL

Zip Code

32417

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

*J. Modzel*

REGISTERED AGENT MUST SIGN

Date 9/28/03

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
P	JOSEPH MODZEL	308 MOONLIGHT BAY DR.	Panama City Beach, FL 32407

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:

*J. Modzel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/28/03

Date

(850) 866-9043

Daytime Phone #

CR2081 (10/02)

7/10/17

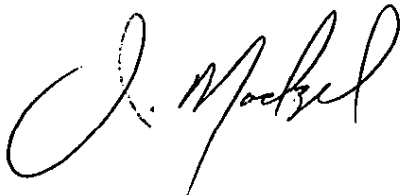
**Omni Construction of Bay County, Inc.**

Post Office Box 9022  
Panama City Beach, Fl. 32417  
(850) 866-9043

We apologize for sending this late. However, we never received the form. Unfortunately at present this is sent to our PO Box where I'm not sure we receive all the mail that we should.

As often as I incorrectly receive mail for other boxes, I'm sure our mail is also being misdirected.

Hopefully, in the future we will have a physical mail location to avoid this problem.

A handwritten signature in cursive script, appearing to read "J. Mackel". The signature is written in dark ink and is positioned on the left side of the page, below the typed text.