

004 13:30

From-STMC ROSENBERG

T-675 P.002/003 F-272

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUL -1 PH 2:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000003537

1. Corporation Name

ELLIOTT BUILDERS, INC

2. Principal Office Address

500 NE 61ST Street

Suite, Apt. #, etc.

3. Mailing Office Address

500 NE 61ST Street

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

Zip

33334

County

Broward

Zip

33334

County

Broward

4. Date Incorporated or Qualified
To Do Business in Florida

2-1-89

5. FBI Number

58-2677194

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

58.75 (Automatic) or 100.00 (Manual) Certificate of Status

900039084249
07/14/04--01009--001 **300.00

7. Name and Address of Current Registered Agent

Name

ELLIOTT, DONNIE JOE

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

500 NE 61ST Street

Suite, Apt. #, etc.

City

Ft. Lauderdale

State

FL

Zip Code

33334

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0605 or 817.0603, F.S.

Signature of
Registered Agent

Don J Elliott

REGISTERED AGENT MUST SIGN

Date 6-24-04

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

Titles	Name of Officer and/or Director	Street Address of Each Officer and/or Director	City / State / Zip
P	DONNIE JOE ELLIOTT	500 NE 61 ST Street	Ft. Lauderdale, FL 33334
V	JEFF L. ELLIOTT	5229 Whitewing Drive	Richmond, TX 77469
S	ANNA LEE ELLIOTT	500 NE 61 ST Street	Ft. Lauderdale, FL 33334

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 807 or 817, 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 807.0401 or 817.0401, 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:

Don J Elliott

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-24-04 (954)772-2243

Date

Daytime Phone #

6-24-04

Donnie Joe Elliott
500 NE 61st Street
Ft. Lauderdale, FL 33334
(954) 772-2243

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

To Whom It May Concern:

I did not receive the two prior 2003 Annual Report/
Uniform Business Report notices.

Respectfully,



Donnie Joe Elliott
President - Elliott Builders, Inc.