
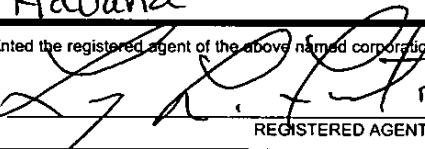
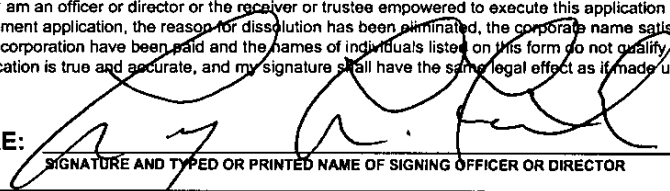


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P01000009877			
1. Corporation Name Larco Construction Inc.			
2. Principal Office Address 331 FL/6A HWY.		3. Mailing Office Address 331 FL/6A HWY.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Havana, Fl.		City & State Havana, Fl.	
Zip 32333	Country U.S.A.	Zip 32333	Country
4. Date Incorporated or Qualified To Do Business in Florida 01-26-2001		5. FEI Number 03-0562936	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent			
Name Fountain, Larry L.			
Street Address (P.O. Box Number is Not Acceptable) 331 FL/6A HWY.			
Suite, Apt. #, Etc.			
City Havana		State FL	Zip Code 32333
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 		Date 06-10-05	
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	Fountain, Larry	331 FL/6A HWY	Havana, Fl. 32333
V	Peters, David	1915 Chowkeebin	Tallahassee, Fl. 32301
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: 		Date 01-26-2001	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

FILED

05 JUN 10 PM 12:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

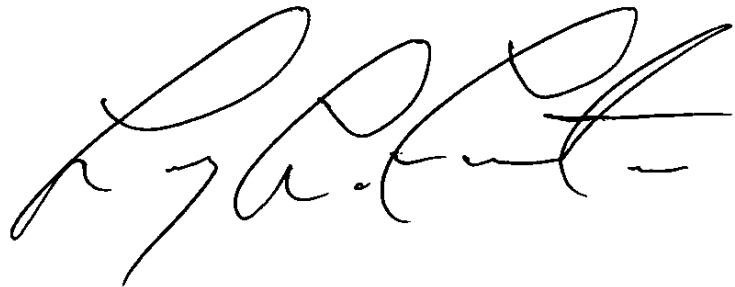
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06/21/05 01054 013 **606.75

CR2E081 (01/05)

June 10, 2005

I did not receive the Annual Report information
for the year 2002. Larco Construction, Inc.
PO1000009877

President

A handwritten signature in black ink, appearing to read "R. G. Furt". The signature is stylized with large, sweeping loops and a horizontal line at the end.