


2004 FOR PROFIT CORPORATION REINSTATEMENT

1/2

DOCUMENT # P01000018059

1. Entity Name
EXACT MASONRY CONSTRUCTION, INC.



FILED

06 MAR 21 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**1241 SOUTHWEST 6TH TERRACE
DEERFIELD BEACH, FL 33441**

Mailing Address
**1241 SOUTHWEST 6TH TERRACE
DEERFIELD BEACH, FL 33441**



2. Principal Place of Business
1748 NW 29th WAY

3. Mailing Address
1748 NW 29th WAY

Suite, Apt. #, etc.

11232004 REIN-P CR2E098 (6/04)

City & State
 Ft. Lauderdale FL

Zip
33311

Country
U.S.

4. FEI Number
65-1076038

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**POOLE, JAMES
1241 SW 6TH TERR
DEERFIELD BEACH, FL 33441**

7. Name and Address of New Registered Agent

Name
JAMES F. POOLE

Street Address (P.O. Box Number is Not Acceptable)
1748 NW 29th WAY

City
Ft. Lauderdale

FL

Zip Code
33311

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **James F. Poole** DATE **02/27/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating corporation)

FILE NOW!!! FEE IS \$150.00
After January 1, 2005, Fee will be \$300.00

REINSTATEMENT 04-06

in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD POOLE, JAMES F 1241 SOUTHWEST 6TH TERRACE DEERFIELD BEACH, FL 33441	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1748 NW 29th WAY Ft. Lauderdale FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 900074506889 05/12/06--01007--005 **458.95
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **James F. Poole** DATE **02/27/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2

**Exact Masonary
Construction, INC.**

POI - 18059

To: Division of Corporations
From: James F. Poole
Date: November 7, 2004
Re: Reinstatement

To Whom It May Concern, Our Company didn't receive any notification from your department; do to a change of address from the result of the multiple hurricanes that hit south Florida. It would be greatly appreciated to have our company back in active status for we can continue rebuilding damages from this disaster.

Thank you in Advance

James F. Poole

President

NEW Address: 1748 NW 29th WAY
Ft. Lauderdale Fl. 33309

Please waive \$600. fee's AND send certificate of status.
The 2004 Notices were not received.