

B 1 7 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR 10 AM 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # FO1000020193

1. Corporation Name

WISEMAN CONSTRUCTION, INC

2. Principal Office Address

6474 SW 28TH ST.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

MIRAMAR FL.

City & State

Zip

Country

Zip

Country

33023

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-1099264

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

KELVIN ANDREW

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

6474 SW 28TH ST.

Suite, Apt. #, Etc.

City

MIRAMAR

State

FL

Zip Code

33023

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

Kelvin Andrew

Date

3-5-04

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	KELVIN ANDREW	6474 SW 28TH ST.	MIRAMAR FL 33023

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:

KELVIN ANDREW

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-5-04

Date

954-347-0621

Daytime Phone #

CR2E081 (10/02)

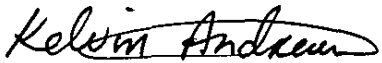
PJ 2 R

WISEMAN CONSTRUCTION, INC.
6474 SW 28TH STREET
MIRAMAR, FL. 33023
PH: 954-347-0121
Tax ID# 65-1099264

To Whom It May Concern:

As per my conversation with your office, I would like to reinstate the above company. The uniform business report form for the year 2002 and 2003 that was mailed was never received. I also was not aware of the filing procedure of such documents. Please consider the waiving of any such penalty that may have accrued during that period of time.

Enclose is my payment of Four Hundred and Fifty as per your office instruction. Thanks very much for your co-operation.



Kelvin Andrew
President