

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1281

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 AUG 19 AM 8:17

DOCUMENT # PD1000038408

1. Corporation Name

G.L.M. CONSTRUCTION GROUP CORP.

REINSTATEMENT 02-04

2. Principal Office Address <u>17050 N. BAY RD.</u>		3. Mailing Office Address <u>SAME</u>	
Suite, Apt. #, etc. <u>#402</u>		Suite, Apt. #, etc. <u>SAME</u>	
City & State <u>SUNNY IS. BEACH FL.</u>		City & State <u>SAME</u>	
Zip <u>33160</u>	Country <u>DADE</u>	Zip <u>SAME</u>	Country <u>SAME</u>

4. Date Incorporated or Qualified To Do Business In Florida <u>11-01</u>		Applied For <input type="checkbox"/>
5. FEI Number <u>65-1106728</u>		Not Applicable <input type="checkbox"/>
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name <u>MATO MARLIN</u>	
Street Address (P.O. Box Number is Not Acceptable) <u>14562 SW 152 PLACE</u>	
Suite, Apt. #, Etc. <u></u>	
City <u>Miami FL</u>	Zip Code <u>33196</u>

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: [Signature] REG'D AGENT Date: 08-18-04

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
R.A.	MATO MARLIN	14562 SW 152 PL.	MIAMI, FL. 33196
D.P.	DIAZ CARMEN	7000 W. 2 ND ST	MIAMI, FL. 33014
D.V.	MATO GUILLERMO L.	14562 SW 152 PL.	MIAMI, FL. 33196

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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: [Signature] GUILLERMO L. MATO Date: 08-18-04 786-236-8027

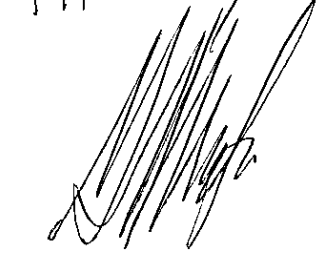
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E061 (01/04)

FLORIDA DEPARTMENT OF STATE DIVISION OF CORP

I GUILLERMO L. MATO AS A DV. OF G.L.M. CONSTRUCTION GROUP DID MOVE FROM THE ADDRESS OF 14562 SW 152 PL. AND DID NOT RECEIVED THE REINSTATEMENT OF APPLICATION OF G.L.M. CONSTRUCTION GROUP. CORP.

THANK YOU



Guillermo L. MATO