2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000062021

791 SE POLYNESIAN AVENUE

PORT ST LUCIE, FL 34983

Address:

City-St-Zip:

FILED May 27, 2005 Secretary of State

Entity Name: MICHAEL CONSTRUCTION, INC. **Current Principal Place of Business: New Principal Place of Business:** 791 SE POLYNESIAN AVENUE PORT ST LUCIE, FL 34983 **Current Mailing Address: New Mailing Address:** 791 SE POLYNESIAN AVENUE PORT ST LUCIE, FL 34983 FEI Number: 65-1116045 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PORATH, MICHAEL R 791 SE POLYNESIAN AVENUE PORT ST LUCIE, FL 34983 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. SIGNATURE: MICHAEL R. PORATH Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVTS** () Delete () Change () Addition PORATH, MICHAEL R Name: Name: 791 SE POLYNESIAN AVENUE Address: Address: City-St-Zip: PORT ST LUCIE, FL 34983 City-St-Zip: () Delete Title: Title: () Change () Addition Name: PORATH, MICHAEL R Name: 791 SE POLYNESIAN AVENUE Address: Address: PORT ST LUCIE, FL 34983 City-St-Zip: City-St-Zip: () Delete Title: Title: VM (X) Change () Addition PORATH, LISA A Name: PORATH, CHRISTOPHER M Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: MICHAEL R. PORATH **PVTS** 05/27/2005

791 SE POLYNESIAN AVENUE

PORT ST LUCIE, FL 34983