

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**

02-03



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JUN 10 AM 8:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000093293

1. Corporation Name

PEREZ CONSTRUCTION, CORP

2. Principal Office Address

416 NW 3 AVE

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

HOMESTEAD FL 33030

Zip

Country

City & State

Zip

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

22-3811276

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

GREGORIO PEREZ

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

416 NW 3 AVE

Suite, Apt. #, Etc.

City

HOMESTEAD

State

FL

Zip Code

33030

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

Gregorio Perez

Date

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	GREGORIO PEREZ	416 NW 3 AVE	HOMESTEAD FL 33030

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:

Gregorio Perez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/8/03

Daytime Phone #

(305) 643-6827

2614

6/2/03

Department of State
Division of Corporation
P. O. Box 6327
Tallahassee, FL 32314

RE: ANNUAL REPORT/UNIFORM BUSINESS REPORT FORM

Gentlemen:

My Company name is Perez Construction, Corp.
and as yet, I have not received the abovementioned form.

I am also sending a check in the amount of \$150.00 to cover
the fee.

Thanks in advance.

PO10000 93293

Sincerely,

Gregorio Perez

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