PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT
OOCUMENT #

FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

P02000013748

1. Corporation Name

SIGNATURE:

BROTHERSCONCRETE SERVICES INC

08 FEB 20 AM 10: 34

SECRETARY OF STATE TALLAHASSEE. FLORIDA

					1 4	00119939	MN4	
2. Principal Office Address - No P.O. Box # 3. Mailing C			office Address		03/1	0 01199 390 170801012021	**300.00	
2835 FAWN LAKE BLVD					1 Day	CR2E081 (12/07)		
Suite, Apt. #, etc.		Suite, Apt. #. etc.			Date Incorporated or Qualified To Do Business in Florida			
City & State		City & State	City & State					
MIMS, FLORIDA					5. FEI Number		Applied For Not Applicable	
Zip	Country	Zip	Country		6.	C9 75	Additional Fee required	
32754					CERTIFICATE		a Certificate of Status	
7. Name and Address of Current Registered Agent								
Name : JOHN M TOLSON						The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not		
Street Address (P.O. Box Number is Not Acceptable) 400 ORANGE STREET				the prid				
Suite, Apt. #, Etc.					received and requesting the reinstatement fee be waived.			
City State Zip Code TITUSVILLE State 32796					,			
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					Date JANUARY 20, 2008			
REGISTERED AGENT MUST SIGN								
	and Street Addresses of Each Officer at Name of	nd/or Director (Florid		orations must list at l Street Address of Eac	_			
Titles	Officers and/or Director	s		Officer and/or Directo				
PD	VIRGINIA VASILOPOULOS	3 2	2835 FAWN LAKE BLVD			MIMS, FLORIDA 32754		
VD 🗢	KATHLEEN VASILOPOULOS 1668 S PARK AVENUE		RK AVENUE	يني يہ جو .	TITUSVILLE; FL-32780			
SD	James Vasilopo	ulos,	2835	FAWN L	k B)vd,	mims, FL3	2754	
						_		
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 filling 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 contained in Chapter 119, 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.								

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

P0200013748
BROTHERS CONCRETE SERVICES INC
2835 FAWN LAKE BLVD
MIMS, FLORIDA 32754

JANUARY 16, 2008

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

To Whom It May Concern:

It was never my intent to let my corporation go to dissolution. The first time I realized that was about to happen was when I received your notice. I never received any other correspondence from your office. I am asking for your help in accepting the normal fee of \$150.00.

Thank you in advance for any consideration you may give me.

Sincerely,

BROTHERS CONCRETE SERVICES INC

JAMES J VASILOPOULOS