


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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FILED

04 JUN -2 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000015404

1. Corporation Name

Kull Construction Inc.

531 N Delaware Ave

531 N Delaware Ave

2. Principal Office Address

531 N Delaware Ave

3. Mailing Office Address

531 N Delaware Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Deland, FL.

City & State

Deland, FL.

Zip

32720

Country

USA

Zip

32720

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 02/06/2002

5. FEI Number

41-2041967

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

Kull, Larry

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

531 N Delaware Ave

Suite, Apt. #, Etc.

City

Deland

State

FL

Zip Code

32720

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**

Larry R. Kull

REGISTERED AGENT MUST SIGN

Date 06/01/2004

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
D	Larry R Kull	531 N Delaware Ave	Deland, FL. 32720

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:

Larry R Kull

LARRY R Kull

06/01/2004

386-734-6084

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E081 (01/04)

PS 2072

To; Dept of State
Division of corporations

Larry R Kull
531 N Delaware Ave
Deland FL 32720

From; Larry R Kull
Kull construction Inc.
P02000015404

RE: Reinstatement of Corporation / Waiver of reinstatement fees

- 1) I have not received any annual reports under this corporation.
- 2) At the time the corporation was started, I was working for a sub-contractor who filed for the corporation, and I left his employment before any paper work was received. I took employment with a larger construction company who carried me on their books. Today Homes Inc. and Today Homes Development Inc, was the name of the company I was working for.
- 3) I did not perform any work under this company, and did not receive any payment.

Please accept my request for reinstatement fee waiver.

Enclosed is the sum of \$308.75

\$61.25 x 2 years = \$122.50	Annual report fee
\$88.75 x 2 years = \$177.50	Corporate supplemental fee
\$8.75 = \$8.75	Certificate of status
Total = \$308.75	Check # 0827

Thank you for any support you may be able to provide.
Sincerely
Larry R Kull

Larry R Kull 6/1/04