

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED  
FILED

03 OCT 14 PM 2:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02000024145

**1. Corporation Name**

CONSOLIDATED CONSTRUCTION ENGINEERING, INC.

*AA*

**2. Principal Office Address**

4532 Tamiami Trail North

Suite, Apt. #, etc.

City & State

Naples, Florida

Zip

34113

Country

USA

**3. Mailing Office Address**

P.O. Box 3099

Suite, Apt. #, etc.

City & State

North Fort Myers, Florida

Zip

33918

Country

USA

**REINSTATEMENT 2003**

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

3/4/02

**5. FEI Number**

04-3652685

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

Paul Rheume

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

4532 Tamiami Trail North

Suite, Apt. #, Etc.

City

Naples, Florida

State

FL

Zip Code

34113

**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]*  
REGISTERED AGENT MUST SIGN

Date

10/14/2003

**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/S/D	Paul Rheume	4532 Tamiami Trail North	Naples, Florida 34113
V/T/D	Robert Cory	4532 Tamiami Trail North	Naples, Florida 34113

**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]*

Paul Rheume, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/14/03

Date

(239) 793-0418

Daytime Phone #

CRZE081 (10/02)