

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P02000047436**

1. Corporation Name

Creation Construction Corp.

2. Principal Office Address

8011 SW 178 St.

Suite, Apt. #, etc.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Palmetto Bay, FL

City & State

Zip

33157

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

4/26/02

5. FEI Number

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$5.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Ismael Soriano

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

8011 SW 178 Street

Suite, Apt. #, Etc.

City

Palmetto Bay

State

FL

Zip Code

33157

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 **11/22/04**

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	Ismael Soriano	8011 SW 178 St.	Palmetto Bay, FL 33157
S	Maggie Soriano	8011 SW 178 St.	Palmetto Bay, FL 33157

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/23/04

Date

(305) 355-5607

Daytime Phone #

FILED

04 DEC -6 PM 1:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04

CR2E081 (01/04)

***CREATION CONSTRUCTION
CORPORATION***

November 22, 2004

Department of State
Division of Corporations
409 East Gaines St.
Tallahassee, FL 32399

Re: Creation Construction, Document Number: P02000047436


To Whom it May Concern:

May this letter serve as a request for reinstatement of the above mentioned Corporation. The notices for the yearly filing fees were not received. Our address on your records is incorrect. Note the correct address is 8011 SW 178 Street, Palmetto Bay, Florida 33157.

Enclosed you will find a company check for the past two years filing fees (\$ 150.00 each year) plus the additional \$ 8.75 for the certificate. If any additinal fees are due please contact us @ (305) 255-5667.

Thank You for your time and Cooperation. It is greatly appreciated.

Sincerely,



Creation Construction Corp.
Maggie Soriano

***8011 SW 178 Street, Palmetto Bay, Florida 33157
(305) 255-5667***