

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 JUN 21 PM 12:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # PO2000071882

1. Corporation Name

BOFAM CONSTRUCTION CO, INC

2. Principal Office Address

3219 N.W 75TH TERRACE

Suite, Apt. #, etc.

City & State

HOLLYWOOD FLORIDA

Zip

33024

Country

U-S-A

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

6/28/02

5. FEI Number

03-0470614

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

ADEKUNLE OGUNDESI

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

4980 SW 95th AVENUE

Suite, Apt. #, Etc.

City

COOPER CITY

State

FL

Zip Code

33328

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

6/12/06

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
PSTD	GIBORAHAN AUSTIN AKINRIN	4500 N.W 36 ST	LAUDERDALE LKS FL 33319
SECRETARY	ADEKUNLE OGUNDESI	4980 SW 95th AVENUE	Cooper City FL 33328
		<u>02/26</u>	

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 contained in Chapter 118, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature] Giborahan Akinrin

Date

6/07/06

Daytime Phone #

781-245-0102

**BOFAM CONSTRUCTION COMPANY, INC**  
3219 N. W. 75<sup>TH</sup> TERRACE HOLLYWOOD, FL 33024  
PH :# 954-438-4932 & FAX: #954-442-3340

JUNE 01, 2006

Secretary of State  
Florida Department of State  
Division of Corporation

Dear Sir/Ma

It was unfortunate that I did not receive 2004, 2005 and this year filing documents, it could be that the documents got lost during postage. Please waive the late fee that will be accessed because we even did not receive the second notice of the corporation annual report yet for 2004 .

Enclosed is a **completed 2006 corporation document application**. Also attached is a check in the amount of \$450.00 for 2004, 2005 and 2006 ANNUAL FILING to bring the registration current.

Our current address is:

3219 NW 75<sup>TH</sup> TERRACE  
HOLLY WOOD, FLORIDA 33024

**THE DOCUMENT NUMBER:**

**P02000071882**

Adekunle Ogundeji

  
Registered Agent of Bofam Construction Co.