

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2009 APR 23 P 1:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **PO2000085431**

1. Corporation Name

PIERSON CONSTRUCTION, INC.

2. Principal Office Address - No P.O. Box #

2345 E ROAD

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 870

Suite, Apt. #, etc.

City & State

LOXAHATCHEE, FL.

City & State

LOXAHATCHEE, FL.

Zip

33470

Country

PALM BEACH

Zip

33470

Country

PALM BEACH

10014948431

04/10/09 01031 003 \$1,058.75

4. Date Incorporated or Qualified
To Do Business in Florida

August 6, 2002

5. FEI Number

522370319

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

Phillip D. Pierson

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

2345 E Road

Suite, Apt. #, Etc.

City

LOXAHATCHEE

State

FL

Zip Code

33470

☒ 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 received and requesting the reinstatement fee be waived.

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 **3-21-09**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Phillip D. Pierson	2345 E Road	LOXAHATCHEE, FL. 33470
S	Phillip D. Pierson	2345 E Road	LOXAHATCHEE, FL. 33470
T	Phillip D. Pierson	2345 E Road	LOXAHATCHEE, FL. 33470

REINSTATEMENT
03-09

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 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.

SIGNATURE:

[Signature]

Phillip D. Pierson

3-21-09

Date

Daytime Phone #

934-970-9340



Public Works and Transportation Department • Water and Wastewater Services
WATER AND WASTEWATER ENGINEERING DIVISION
2555 West Copans Road • Pompano Beach, Florida 33069 • 954-831-0745 • FAX 954-831-0798/0925

Image

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX

PAGES, including cover: **2**

DATE: February 3, 2009

TO: *Jeraline*

FAX #: 850-245-6017

FROM: *Phil Pierson*

RE: *PIERSON Construction, Inc*

MESSAGE:

CC:

Jeraline

*As per our discussion, I do not intend to
reinstate Pierson Construction Inc.*

P07000101893

2007

I do intend to reinstate

P02000085431.

Filed 8-6-2002

Any questions, please call me @ 954 790-9340.

Thank you; Phil Pierson