

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Page 1 of 2

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 MAY 11 AM 10:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000087282

1. Corporation Name

M&M'S CONSTRUCTION INC.

2. Principal Office Address

2936 YACOLT AVE

Suite, Apt. #, etc.

City & State

NORTH PORT, FL.

Zip

34286

Country

USA

3. Mailing Office Address

2936 YACOLT AVE

Suite, Apt. #, etc.

City & State

NORTH PORT, FL

Zip

34286

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

8/12/2002

5. FEI Number

61-1423735

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

03/15/04 0102 017 300000

7. Name and Address of Current Registered Agent

Name

MIGUEL A. RUBIO

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

2936 YACOLT AVE

Suite, Apt. #, Etc.

City

NORTH PORT

State

FL

Zip Code

34286

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]

Date 5/7/04

REGISTERED AGENT MUST SIGN

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
<u>P</u>	<u>MIGUEL A. RUBIO</u>	<u>2936 YACOLT AVE</u>	<u>NORTH PORT, FL 34286</u>
<u>V</u>	<u>MIGUEL A. RUBIO</u>	<u>2936 YACOLT AVE</u>	<u>NORTH PORT, FL 34286</u>
<u>ST</u>	<u>MIRIAM I. RUBIO</u>	<u>2936 YACOLT AVE</u>	<u>NORTH PORT, FL 34286</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 under section 119.07(3)(f), 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]

MIGUEL A. RUBIO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/7/04

Date

941-809-6111

Daytime Phone #

CR2E081 (01/04)

Payer

M&M'S CONSTRUCTION, INC.  
2936 YACOLT AVE  
NORTH PORT, FL 34286  
941-426-4749

May 7, 2004

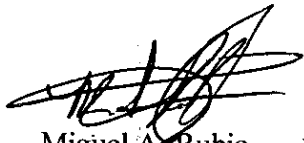
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 3214

This letter is in regards to Reference letter 204A00017370 dated 3/16/2004, due to the conversation that took place on 5/7/04 we became aware that this letter was sent to our business. This letter was read to via phone on above date.

The reason in which we did not send out 2003 UBR was that we never received the notification in 2003, the first notification we received in fact was the notification of dissolution. Therefore we did not apply. In February of 2004 the application for reinstatement was mailed, and the check sent with the application has since cleared our account. Included in this letter is a new application for reinstatement.

Thank you in advance for your attention in this matter. If there are any question please feel free to contact us at the above address or at [miriamr2936@aol.com](mailto:miriamr2936@aol.com).

Respectfully,

  
Miguel A. Rubio  
president