1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 MAY -6 PM 5:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200031755262
04/02/04--01070--013 **300.00

03-01

DOCUMENT # P02000089904

1. Corporation Name

Santa Fe Concrete Inc.

2. Principal Office Address	3. Mailing Office Address
1164 Cherry Ln	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lakeland	City & State: Florida
Zip: 33811 Country: Polk	Zip: 33811 Country: Polk

4. Date Incorporated or Qualified To Do Business in Florida ? 2002

5. FEI Number: 01 0728044 ☐ 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: Marisela Sandoval

Street Address (P.O. Box Number Is Not Acceptable): 1164 Cherry Ln

REINSTATEMENT

Suite, Apt. #, Etc.: La

City: Lakeland State: FL Zip Code: 33811

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: Marisela Sandoval Date: 3-16-04

REGISTERED AGENT MUST SIGN

CR2E081 (01/04)

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
	N/A		
Pres	Marisela A. Sandoval	1164 Cherry Ln	Lakeland Fl 33811
V. pres	Jesus Sandoval	1164 Cherry Ln	Lakeland Fl 33811

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: Marisela Sandoval Marisela A. Sandoval 3-16-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Marisela Sandoval

Jesus Sandoval Jesus Sandoval

BB

3-21-04

T 0 2000 8 9904

To whom this may concern:

I Mariseld G. Sandoval did not get any renewal papers for my corporation Please accept my letter to allow me to the waive the penalty

Thank you

Mary Sandoval
863 398-4421 cel
863 648-5895 Fax

FEI #
0107 28044