

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

*Payklotz*

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 MAY -7 PM 12:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # *PO2000092043*

1. Corporation Name  
*Randolph Canyon Construction Inc.*

2. Principal Office Address  
*1880 NW 8th St*

3. Mailing Office Address  
*1880 NW 8th St*

Suite, Apt. #, etc.  
*Pompano Bch Fla*

Suite, Apt. #, etc.  
*Pompano Bch Fla*

City & State  
*33069*

City & State  
*Pompano Bch Fla*

Zip  
*Broward*

Zip  
*33069*

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number  
*34-1991241*

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  
*CANYON Randolph*

Street Address (P.O. Box Numbers Not Acceptable)  
*1880 NW 8th St*

Suite, Apt. #, Etc.  
*Pompano Bch Fla*

City  
*Pompano Bch Fla*

*900035730049*  
*05/07/04-01009-004 \*\*300.00*

State  
**FL**

Zip Code  
*33069*

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 \_\_\_\_\_ Date \_\_\_\_\_

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
<i>P</i>	<i>CANYON Randolph</i>	<i>1880 NW 8th St</i>	<i>Pompano Bch Fla 33069</i>
<i>V</i>	<i>CANYON Audrey</i>	<i>1880 NW 8th St</i>	<i>Pompano Bch Fla 33069</i>

**REINSTATEMENT 03-04**

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: *Randolph Canyon*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*5/3/04* Date *954 849-3413* Daytime Phone #

*(954) 975 7231*

CR2001 (01/04)

PPPPPP  
May 3, 1954

To whom it May Concern,  
If Randolph Cannon is writing to  
let you know that I haven't received  
my form for the corporation and  
it wasn't active at all. Trying to  
start this year. please advise my  
fee thank you. I'll just advise my  
firm #.

Randolph Cannon  
(954) 925-7231  
(954) 849-3413.