

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 NOV -6 PM 1:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000118690**

1. Corporation Name

**D-RANGO CONSTRUCTION CORP.**

Principal Place of Business

Mailing Address

721 CYPRESS POINT DRIVE WEST  
PEMBROKE PINES FL 33027

721 CYPRESS POINT DRIVE WEST  
PEMBROKE PINES FL 33027



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

11/05/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

03-0495907

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	ARANGO, EDUARDO	721 CYPRESS POINT DRIVE WEST	PEMBROKE PINES FL 33027

300024478343

11/06/03--01034--004 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ARANGO, EDUARDO  
721 CYPRESS POINT DRIVE WEST  
PEMBROKE PINES FL 33027

Name

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

Suite, Apt. #, Etc.

City

State  
**FL**

Zip Code

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

Signature of  
Registered Agent

**SIGNATURE REQUIRED**

Date

REGISTERED AGENT MUST SIGN

11. 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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/30/03

Date

(305) 218-7900

Daytime Phone #

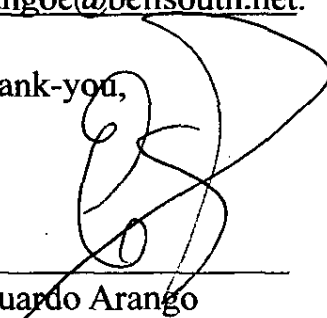
CR2E040 (7/03)

October 30, 2003

To whom it may concern:

This is to inform that I, Eduardo Arango, of D-Rango Construction Corp., ~~did not receive any prior uniform business report (UBR) notices.~~ I am writing this letter so that the penalty fee will be waived. Please note that my corporation is brand new, just incorporated 11/05/2002, and I was unaware of this process. If you need any additional information, please contact me at (305) 218-7900 or my home (954) 443-9007, or via email at: arangoe@bellsouth.net.

Thank-you,



Eduardo Arango