

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 SEP 26 AM 10:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P02000122158**

1. Corporation Name

Ramar Drywall, Inc.

900023553879
10/03/03--01081--013 **150.00

REINSTATEMENT 03

2. Principal Office Address

1602 NW 31 ST.

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Zip

33142

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11-15-2002

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name

Barrera, Raul

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

1602 NW 31 ST

Suite, Apt. #, Etc.

City

Miami, FL 33142

State

FL

Zip Code

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

9-24-03

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 |
|--------|--------------------------------------|---|--------------------|
| D | Barrera, Raul | 1602 NW 31 ST. | Miami, FL 33142 |
| D | Vidaurre, Martin | 1602 NW 31 ST. | Miami, FL 33142 |
| | | | |
| | | | |
| | | | |
| | | | |

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

09-24-03

Daytime Phone #

305-519-

8704

CRZEDAT (9/01)

9/26

Raul Barrera
RAMAR DRYWALL INC
1602 NW 31 ST
Miami, FL 33142
(305)638.8986

September 24, 2003

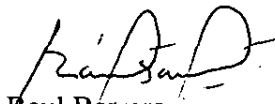
Florida Department of State
Division of Corporations

Re: **Ramar Drywall Inc.**
Document # P02000122158

To Whom It May Concern,

As per my telephone conversation with your office, with this letter I am asking that the penalty please be waived for the corporation. We did not receive notification in **2003** in the mail, so thank you in advance for your time and consideration.

Sincerely,



Raul Barrera
President