

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # p03000074642

1. Corporation Name

CLAUDIO RIOS CONSTRUCTION INC

2. Principal Office Address

210 E ROSEHILL AVE

Suite, Apt. #, etc.

City & State

DELAND FL

Zip
32724

Country

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida 07/08/2003

5. FEI Number

331063692

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

CLAUDIO RIOS

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

210 E ROSEHILL AVE

Suite, Apt. #, Etc.

City

DELAND

State

FL

Zip Code

32724

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

Claudio Rios

Date 2/24/06

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
P	CLAUDIO RIOS	210 E ROSEHILL AVE	DELAND FL 32724

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 contained in Chapter 119, 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:

Claudio Rios

CLAUDIO RIOS

02/24/2006 386-7381120

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

K. Eckel MAR 08 2006

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Claudio Rios Construction Inc.
210 E. Rosehill Ave
Deland, FL 32724-2347

February 24, 2006

Department of State
Division of Corporations
Corporate Filings
PO Box 6327
Tallahassee, FL 32314

RE: Claudio Rios Construction Inc.
Document Number P03000074642
Reinstatement

Dear Madam or Sirs,

We did not receive the annual report notice for 2004. Because of this we ask you to waive the reinstatement fee. Enclosed please find a check for \$450.00 which represents the fees for 2004, 2005 and 2006. Thank you for your attention to this matter.

Sincerely,

Claudio Rios

Claudio Rios