2005 FOR PROFIT CORPORATION REINSTATEMENT

PROCEED PROCE OF DESCRIPTION OF THE PROCESS (CM) 2. Principal Place of Dusiness 3. Melting Actionss Sulfe, April #, stic. Solite, April #, stic. Solite, April #, stic. Solite, April #, stic. Solite, April #, stic. City & State City	DOCUMENT # P03000106600 1. Entity Name S & S CONSTRUCTION COMPANY									
Solite, Apt. F. REC. Solite Solite City & State City & State City & State Country Zip Country	7827 SW 140TH COURT 7827 SW 140TH COUR			₹		550. 1/11	J. PET	TATE LCODA, Leon	ים ו	
City & Siste Country Country S. Certificate of Status Desired S. Certificate of Sistes Desired Fig. Replacement Fig. Replacem	Principal Place of Business 3. Mailing Address									
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S. Certification of Status Desired	City & State		City & State							
FILINGS, INC. 3732 N.W. 18TH STREET FT. LAUDERDALE, FL 33311-4132 City Man. FL 293333	Zip	Country	Zip	Count	try	5. Certificate	of Status Desired	□ \$8.75 Ad	ditional	
B. The above named entity subgrute his statement for the pugadose of changing its registered diffice or registered agent, or both, in the State of Florids. I am familiar with, and accept the obligations of registered Ryand. SIGNATURE Signature, heado present name of registered lagont and the Eapthclake. FILE NOWITH FEE 19 \$750.00 After January 1, 2006, Fee will be \$900.00 10. OFFICERS AND DIRECTORS ITTLE MAKE MAKE STREET ADDRESS CITY-ST-2P TITLE Delete STREET ADDRESS CITY-ST-2P TITLE MAKE STREET ADDRESS CITY-ST-2P Change Addition TITLE MAKE STREET ADDRESS CITY-ST-2P Change Ch	3732 N.W.	NC. 16TH STREET	t Registered Agent	Street Address	iney 5 (P.O. Box rumon	Mora	les B Cout	t		
TITLE MORALES, SIDNEY STREET ADDRESS CITY-ST-ZPP TITLE MAME STREET ADDRESS CITY-ST-ZPP Change Addition TITLE MAME STREET ADDRESS CITY-ST-ZPP Ch	the obligati	Signature. hypod or printed name of registered ages	m and title if applicable. (NOT		ed office or regist	tered agent, or bo	10/	I .5 -	, and accept	
MORALES, SIDNEY 7827 SW 140TH COURT CITY-ST-2P MIAMI, FL 33183 TITLE MAKE SIREET ADDRESS CITY-ST-2P TITLE MAKE SIREET ADD										
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MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report Is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as a goulired by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	NAME STREET ADDRESS	REPORTAT	Property Control	SI RE	EET ADDRESS	· ·		☐ Change	Addition	
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