

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED 1/2
06 SEP 21 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000112112

1. Corporation Name

K.D PLUMBING INC.

2. Principal Office Address

2958 JEANNIN DR

Suite, Apt. #, etc.

3. Mailing Office Address

2958 JEANNIN DR

Suite, Apt. #, etc.

City & State

NORTH PORT, FL

City & State

NORTH PORT, FL

Zip 34288-7854

Country US

Zip 34288-7854

Country US

REINSTATEMENT 05-180

4. Date Incorporated or Qualified To Do Business in Florida

01/01/2004

5. FEI Number

200293761

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

DUBINSKI, KENNETH

Street Address (P.O. Box Numbers Not Acceptable)

2958 JEANNIN DR

Suite, Apt. #, Etc.

City

NORTH PORT

State

FL

Zip Code

34288-7854

200080180282
09/26/06--01039--010 **300 00

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

REGISTERED AGENT MUST SIGN

Date

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,P	DUBINSKI, KENNETH	2958 JEANNIN DR	NORTH PORT, FL 34288-7854

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SEP 19 2006

Date

941-234-6171

Daytime Phone #

K. Eckel SEP 22 2006



Dowd, Whittaker & Associates, C.P.A.'s, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

Phone (941) 493-5299 • Fax (941) 493-3290

John F. Dowd, C.P.A.
Thomas E. Whittaker, C.P.A.

Members of American and
Florida Institutes of C.P.A.'s

September 19, 2006

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: K. D. Plumbing, Inc.
Document #P03000112112
FEI #200293761

Dear Sir or Madam:

Please accept the attached Corporate Reinstatement form for the Florida Department of State, Division of Corporations. Kenneth Dubinski, President of the corporation, did not receive the Corporate Report form for 2005 and 2006.

You may call Mr. Dubinski at 941-234-6171 with any further questions.

Sincerely,

Thomas E. Whittaker
Certified Public Accountant

TEW/csa
Enclosure