


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT #</b> P03000125137			
<b>1. Corporation Name</b> Guerrero Drywall, Inc.			
<b>2. Principal Office Address</b> 1107 E. 127th Ave Suite, Apt. #, etc. Apt # 120 City & State Tampa, FL Zip 33612 Country USA		<b>3. Mailing Office Address</b> 1107 E. 127th Ave. Suite, Apt. #, etc. Apt # 120 City & State Tampa, FL Zip 33612 Country USA	

**FILED**  
06 JAN -3 AM 9:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04-06  
CR2E081 (8/05)

<b>4. Date Incorporated or Qualified To Do Business in Florida</b> 11/3/2003	
<b>5. FEI Number</b> 68-0573402	<input type="checkbox"/> <b>Applied For</b> <input type="checkbox"/> <b>Not Applicable</b>
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

<b>7. Name and Address of Current Registered Agent</b>		
<b>Name</b> Gilberto Duran		
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 1107 E. 127th Ave.		
<b>Suite, Apt. #, Etc.</b> Apt # 120		
<b>City</b> Tampa	<b>State</b> FL	<b>Zip Code</b> 33612

<b>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.</b>			
<b>Signature of Registered Agent</b> <u>Gilberto Duran</u>		<b>Date</b> <u>12/22/05</u>	
<b>REGISTERED AGENT MUST SIGN</b>			
<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>			
<b>Titles</b>	<b>Name of Officers and/or Directors</b>	<b>Street Address of Each Officer and/or Director</b>	<b>City / State / Zip</b>
P	Gilberto Duran	1107 E. 127th Ave Apt 120	Tampa, FL 33612
VP	Salome Duran	1107 E. 127th Ave. Apt 120	Tampa, FL 33612
Sec	Rodolfo Duran	1107 E. 127th Ave Apt 120	Tampa, FL 33612
<b>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.</b>			
<b>SIGNATURE:</b> <u>Gilberto Duran</u> <u>Gilberto Duran</u>		<b>Date</b> <u>12-22-05</u>	<b>Daytime Phone #</b> <u>(813) 88-8780</u>
<b>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</b>		<b>Date</b>	<b>Daytime Phone #</b>