

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 DEC -1 AM 9:46

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P03000129531

LAND'S EDGE CONSTRUCTION INC.

2. Principal Office Address - No P.O. Box #

1477 DORCHESTER ST.

Suite, Apt. #, etc.

3. Mailing Office Address

1477 DORCHESTER ST.

Suite, Apt. #, etc.

City & State

PORT CHARLOTTE FL.

City & State

PORT CHARLOTTE

Zip

Country

33952

CHARLOTTE

Zip

Country

33952

CHARLOTTE

7. Name and Address of Current Registered Agent

Name

JOHN PHILLIPS

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

1477 DORCHESTER ST.

Suite, Apt. #, Etc.

City

PORT CHARLOTTE

State

FL

Zip Code

33952

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

John Phillips

REGISTERED AGENT MUST SIGN

Date 10-31-08

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	JOHN PHILLIPS	1477 DORCHESTER	PORT CHARLOTTE FL 33952

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:

John Phillips

JOHN PHILLIPS

10-31-08

941-628-5767

REINSTATEMENT 07-08
CR2E081 (10/08)

4. Date Incorporated or Qualified To Do Business in Florida

11-10-2003

5. FEI Number

20-0385041

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status