PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
07 APR 23 PM 12:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000015962

1. Corporation Name

Juniors Plastering Inc

600101397506
05/03/07--01029--030 **150.00

REINSTATEMENT 05-07

2. Principal Office Address - No P.O. Box #		**3.** Mailing Office Address	
2241 NE 135th LN		174 NE 96th Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
N Miami Beach- Florida		Miami Shores - Florida	
Zip: 33181	Country: USA	Zip: 33138	Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 1/21/2004

5. FEI Number: 20-0621091 ☐ 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: PB & A Financial Services Corp

Street Address (P.O. Box Number is Not Acceptable): 174 NE 96th Street

Suite, Apt. #, Etc.:

City: Miami Shores | State: FL | Zip Code: 33138

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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 _____ Date 3-30-2007
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	Raul H Patino	2241 NE 135 Lane	N Miami Beach/Fl/33181
VP	Paula Zarate	2241 NE 135 Lane	N Miami Beach/Fl/33181
	REINSTATEMENT 05-07		

600101397506
05/03/07--01029--031 **300.00

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: Raul Patino Raul Patino 3.30.07 305-758-1136.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #