PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

		•	, <u> </u>	-			
REINSTATEMENT		Secretar	ORIDA DEPARTMENT OF STATE Secretary of State Division of corporations				
DCQUMENT # P0400017629 1. Corporation Name				07 JAH - 2 AH 10: 42			
Neil O'Neal Roofing Inc.				TALLAMASSEE, FLORIDA			
WO6 -52363					The second second		
2. Principal Office Address 222 Caroline Dr 222 C					CR2E081 (12/05)	05-07	
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.	Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 1/20/2004		
City & State City & State			<u> </u>				
		West-Palm	T		5944390 Applied For Not Applicable		
^z ₀ 33413	3 ÜSA	33413	ŰŠÄ	CERTIFICATE		Additional Fee required a Certificate of Status	
	7. Name and Address of Current Registered Agent						
4	Neil O'Neal Sr.				01/17/0701028002 **300.00		
	222 Caroline Dr		,0000082181330				
	Suite, Apt. #, Etc.			11/30/0601050005 **150.0			
	West Palm Beach, FL				State 33413		
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 11/28/06 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		
Р	Neil O'Neal Sr.		222 Caroline Dr		West Palm Beach, FL 33413		
VP	Lisa Bailey		222 Caroline Dr		West Palm Beach, FL 33413		
Т	Tara O'Neal	222	222 Caroline Dr		West Palm Beach, FL 33413		
		REINST			TATEMENT		
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 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylime Phone #							

NEIL O'NEAL ROOFING 222 Caroline Drive West Palm Beach, FL 33413 Ph. (561)686-0775 Fax (561)686-0692

November 28, 2006

Reinstatement Division
Division of Corporations—
PO Box 6327
Tallahassee, FL 32314

Re: Doc # P04000017629

To Whom it May Concern:

Please be advised that our corporation never received our annual reports. Please waive the penalty and accept our check for \$150.00.

Sincerely,

Neil O'Neal

President