

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2005
CORPORATION
REINSTATEMENT
(Annual Report)

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JUL 29 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO4 000060260
1. Corporation Name
C. & L. Construction & Management
of Florida, Inc.

2. Principal Office Address <u>345 Dartmouth Rd</u>		3. Mailing Office Address <u>345 Dartmouth Rd</u>	
Suite, Apt. #, etc. —		Suite, Apt. #, etc. —	
City & State <u>Lake Worth, FL.</u>		City & State <u>Lake Worth, FL.</u>	
Zip <u>33460</u>	Country <u>USA</u>	Zip <u>33460</u>	Country <u>USA</u>

4. Date Incorporated or Qualified
To Do Business in Florida MAY 5, 2003

5. FEI Number
55-0829645

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
Wanda T. Starr-Campbell

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

Suite, Apt. #, Etc.
—

City
LAKE WORTH, FLORIDA

State
FL

Zip Code
33460

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 [Signature] Date 6/23/05.

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	RICHARD CAMPBELL	345 DARTMOUTH Rd	LAKE WORTH, FL. 33460
V	WANDA T. STARR-CAMPBELL	345 DARTMOUTH Rd.	LAKE WORTH, FL. 33460
			800058396518 08/08/05--01057--002 **158.75
			<u>[Signature]</u>

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.

SIGNATURE: [Signature] Date 6/23/05 Daytime Phone # 547-9948

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PO4 000060260

**C. & L. CONSTRUCTION & MANAGEMENT
OF FLORIDA, INC.
345 Dartmouth Road
Lake Worth, Florida 33460
Phone 561/547-9948
Facsimile 561/547-9938**

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

6/23/2005

*re sent
7/13/05
(R)*

RE: ~~P03000052104~~ *(R)* P04000060260.
2005 Annual Corp Report /(Reinstatement?)

Dear Sir/Madam:

I did not receive an annual Report.
After finding out the other day that I did not file my
above return, I immediately telephoned your office
to see why I did not received my printed report.

Your office told me to print this off the internet, send
this letter and attach my \$150.00 (plus \$8.75 for certifi-
cate) along with filling out the form. All is enclosed.

Please advise and thank you for your consideration.

Richard Campbell, Pres. *(R)*

Thank you