


2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000076421 1. Entity Name WOOD DECK DOCK CONSTRUCTION, INC	
--	---

FILED
 06 OCT 17 AM 11:36
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business 1302 SW 2ND AVENUE DANIA, FL 33004	Mailing Address 1302 SW 2ND AVENUE DANIA, FL 33004
--	--



2. Principal Place of Business Suite, Apt. # etc.	3. Mailing Address Suite, Apt. # etc.
--	--

10032006 REIN-P CR2E098 (11/05) **06**

City & State	City & State
--------------	--------------

4. FEI Number 20-1108070	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
-----------------------------	---

Zip	Country	Zip	Country
-----	---------	-----	---------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent

PINEDO VARGAS, YLMO 1302 SW 2ND AVENUE DANIA, FL 33004	Name
	Street Address (P.O. Box Number is Not Acceptable)
	City FL Zip Code

7. Name and Address of New Registered Agent

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

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent.

SIGNATURE _____
Signature required for the filer or filer's authorized representative. NOTE: Registered Agent signature required when reinstating. DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2007, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	NAME	Delete
P	PINEDO VARGAS, YLMO 1302 SW 2ND AVENUE DANIA, FL 33004	<input type="checkbox"/>
P		<input type="checkbox"/>
P		<input type="checkbox"/>
P		<input type="checkbox"/>
P		<input type="checkbox"/>
P		<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	Delete
Change	400080932194	<input type="checkbox"/>
Addition	10/18/06--01005--013 **150.00	<input type="checkbox"/>
Change		<input type="checkbox"/>
Addition		<input type="checkbox"/>
Change		<input type="checkbox"/>
Addition		<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with an officer, like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR