

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 SEP 26 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000082589

1. Corporation Name

PEGASUS GENERAL CONTRACTORS, INC.

2. Principal Office Address

2390 CATTLEMEN RD.

3. Mailing Office Address

2390 CATTLEMEN RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA, FL

City & State

SARASOTA, FL

Zip

34232

Country

USA

Zip

34232

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

5/24/04

5. FEI Number

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

Corporation Service Company

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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

Laura R. Dunlap

Laura R. Dunlap
as its agent

Date

9/26/05

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
Pres	Gary Turner	2390 Cattlemen Rd.	Sarasota FL 34232
Sect	Sharron Turner	2390 Cattlemen Rd.	Sarasota FL 34232

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:

Gary Turner, Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF NAMED OFFICER OR DIRECTOR, OR

Date

9/26/05 941-552-7898

Daytime Phone #

M. Williams SEP 26 2005

CR2E081 (01/04)



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 604239 7436666

AUTHORIZATION

Patricia Pigute

COST LIMIT : \$ 758.75

ORDER DATE : September 19, 2005

ORDER TIME : 9:44 AM

ORDER NO. : 604239-010

CUSTOMER NO: 7436666

CUSTOMER: Mr. Gary Turner
Mr. Gary Turner
Suite 108
8640 Sw 212 Street
Miami, FL 33189

DOMESTIC FILINGS

NAME: PEGASUS GENERAL CONTRACTORS,
INC.

RECEIVED
05 SEP 26 AM 11:02
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - Ext# 2935

EXAMINER'S INITIALS _____