

2007

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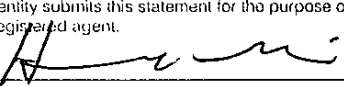
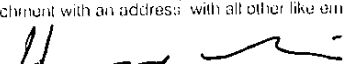
# FOR PROFIT CORPORATION REINSTATEMENT

FILED

07 DEC -5 PM 3:13

CLERK OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT 106-07

DOCUMENT # <b>P05000010354</b>			
1. Entity Name <b>D J M Construction Consultant, Inc</b>			
Principal Place of Business		Mailing Address	
2. Principal Place of Business <b>13950 NW 41st</b> Suite, Apt. #, etc. <b>240</b> City & State <b>Doral FL</b> Zip <b>33178</b> Country <b>US</b>		3. Mailing Address <b>13950 NW 41st</b> Suite, Apt. #, etc. <b>240</b> City & State <b>Doral, FL</b> Zip <b>33178</b> Country <b>Miami - Dade</b>	
4. FEI Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
		Name <b>Haskell Mackowski</b> Street Address (P.O. Box Number is Not Acceptable) <b>6350 NW 201 St</b> City <b>Miami</b> FL Zip Code <b>33015</b>	
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:  DATE: <b>11/29/07</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PSTD Main, Alvaro 1330 S.W. 144th Miami, FL 33186</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PS Mackowski, Haskell 6350 NW 201 St Miami, FL 33015</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>500112850335 12/05/07--01024--013 **300.00</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 if changed, or on an attachment with an address with all other like empowered.			
SIGNATURE: 		DATE: <b>11/29/07</b> 786-346-1369 <small>Daytime Phone #</small>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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D & M CONSTRUCTION CONSULTANT, INC.  
13950 NW 41 ST # 240  
DORAL, FL 33178

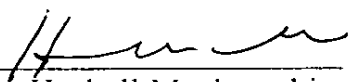
November 29, 2007

To Whom It May Concern:

This is a brief letter stating that I did not receive any postcard or notice reminding me of the Uniform Business Report of my company D & M Construction Consult, Inc. with Document # P05000010354. Along with this letter you will find a check in the amount of \$300.00 and my Uniform Business Report for the years of 2006 - 2007.

If you need further assistance please feel free to contact us. Thank you in advance for your help.

Sincerely,

  
Haskell Mackowski