

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

2006 AR

CORPORATION



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #P05000040028

1. Corporation Name

Dimar Construction, Inc.

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2. Principal Office Address		3. Mailing Office Address	
526 NE 42nd Court		526 NE 42nd Court	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Ft. Lauderdale, Fla.		Ft. Lauderdale, Fla.	
Zip	Country	Zip	Country
33309		33309	

4. Date Incorporated or Qualified To Do Business in Florida	
5. FEI Number	Applied For
20-2434017	Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name	
Martin C. Kildea	
Street Address (P.O. Box Number is Not Acceptable)	
526 NE 42nd Court	
Suite, Apt. #, Etc.	
City	State Zip Code
Ft. Lauderdale	FL 33309

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

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.	Martin C. Kildea	1091 NW 47th Street	Ft. Lauderdale, Fl. 33309

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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:

Martin Kildea

mar. 21, 2006 (954)617-0700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #