PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	2001 NOV - 1 AM 10: 36
DOCUMENT # 005000 127 3 70		SECRETARY OF STATE TALLAHASSEE.FLORIDS
Merlot construction, Inc		800111582608 11/01/0701033021 **300.00
2. Principal Office Address - No P.O. Box#	3. Mailing Office Address 13342 NW 5 th terrace	REINSTATEMENT 06-07
Suite, Apt. #, etc.	Suite, Apri. #, etc.	
City & State	City & State	4. Date incorporated or Qualified To Do Business in Florida 9 10 05
Miami, Florida	Miomi, Florida	5. FEI Number 320101524 Applied For PO5000127370 Not Applicable
21p Country 33182 USA	33182 VSA	CERTIFICATE OF STATUS DESIRED \$3.75 Additional Fee required for a Certificate of Status
7. Name and Address of	Current Registered Agent	
Name Irma Leticia Mendez		The reinstatement fee is imposed, except in circumstances which the entity did not receive
Street Address (P.O. Box Number is Not Acceptable)		the prior notices. By checking this box, you
Suite, Apt. #, Etc.		are certifying the prior notices were not received and requesting the reinstatement
Miami	State Zip Code FL 33182	fee be waived.
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 REGISTERED AGENT MUST SIGN Date		
	/or Oirector (Florida nonprofit corporations must list at k	
Titles Name of Officers and/or Directors	Street Address of Eac Officer and/or Directo	r City / State / Zip
Resident Irma Leticia Mendez 13342 NW 5th Fer Miami, FL 3319		Miami, FL 33182
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 setisfies 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 contained in Chapter 119, 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 cath.		
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Of Dayline Phone #		

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October 30th, 2007

To Whom It May Concern:

Please be advised that Merlo't Construction, Inc did not receive a bill for the annual fee. We do apologize that you did not receive a payment. The corporation's information is as following;

Merlo't Construction, Inc FEI No.: P05000127370 13342 NW 5th Terrace Miami, Florida 33182

Sincerely,

Irma Leticia Mendez Register Agent/President