

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1/2

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

07 DEC 19 PM 2:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P05000149378

**1. Corporation Name**

Shahata Construction Services Corp.

W67-59107

**2. Principal Office Address - No P.O. Box #**

6261 SW 20th St

Suite, Apt. #, etc.

**3. Mailing Office Address**

6261 SW 20th St

Suite, Apt. #, etc.

**City & State**

Pompano Beach, FL

Zip

Country

33068

USA

**City & State**

Pompano Beach, FL

Zip

Country

33068

U.S.A

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

11/8/05

**5. FEI Number**

20-3768756

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**

Kevin Guzman

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

6261 SW 20th St.

Suite, Apt. #, Etc.

**City**

Pompano Beach

**State**

FL

**Zip Code**

33068

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement 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

Kevin Louis Guzman Santana

REGISTERED AGENT MUST SIGN

Date 11-24-07

**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
P	Kevin Guzman	6261 SW 20th St	Pompano Beach FL 33068

REINSTATEMENT DL-07

*[Signature]*

**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 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 oath.**

SIGNATURE:

Kevin Louis Guzman Santana

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

956-677-9775

Daytime Phone #

d/z

**PETER T. FLOOD**  
ATTORNEY AT LAW  
125 NORTH AIRPORT ROAD, SUITE 202  
NAPLES, FLORIDA 34104  
TELEPHONE (239) 263-2177  
FAX (239) 263-0787

December 13, 2007

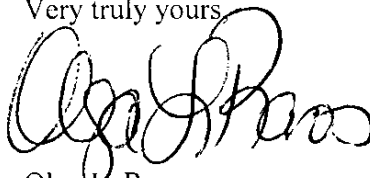
Department of State  
Division of Reinstatement  
Attn: Michelle Milligan  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: Shahata Construction Services Corp.  
Ref # P05000149378

Dear Ms. Milligan:

Per our phone conversation today please find enclosed the original form for reinstatement. I have included the FEID # for the corporation on the form. Please note the signature of the Registered Agent is printed, because that is in fact his signature. Please reinstate the corporation as soon as possible. If you should have any questions please do not hesitate to contact our office.

Very truly yours



Olga L. Ramos  
Legal Assistant