

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 FEB 17 PM 12:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000084899

1. Corporation Name

V+H Steel Erectors, Inc.
21005 Taft St.
Pembroke Pines, FL 33029

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

21005 Taft Street

Suite, Apt. #, etc.

City & State

Pembroke Pines, FL

Zip

33029

Country

USA

3. Mailing Office Address

21005 Taft Street

Suite, Apt. #, etc.

City & State

Pembroke Pines, FL

Zip

33029

Country

USA

REINSTATEMENT

CR2E081 (12/08)

02-09

4. Date Incorporated or Qualified
To Do Business in Florida

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

Marie Nix

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

21005 Taft Street

Suite, Apt. #, Etc.

City

Pembroke Pines.

State

FL

Zip Code

33029

☒ 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 of 617.0503, F.S.

Signature of
Registered Agent

Marie Nix

REGISTERED AGENT MUST SIGN

Date

2/13/09

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 |
|--------|--------------------------------------|---|--------------------------|
| D | Marie Nix | 21005 Taft Street | Pembroke Pines, FL 33029 |
| D | Lisa Redono | 21005 Taft Street | Pembroke Pines, FL 33029 |
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500143742715
02/17/09--01005--025 **300.00

500143742715
02/17/09--01005--025 **150.00

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:

Marie Nix

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/13/09

Daytime Phone #