

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS
W04003339440

FILED

04 MAR 29 PM 12:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P28481

1. Corporation Name

G-A Masonry Corp.

100023962801
10/21/03--01030--016 **750.00

REINSTATEMENT 02-04

2. Principal Office Address

7014 Hughes Ave

3. Mailing Office Address

7014 Hughes Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Crestwood, KY

City & State

Crestwood, KY

Zip

Country

Zip

Country

40014

40014

4. Date Incorporated or Qualified
To Do Business in Florida

Jan 1/03

5. FEI Number

14-1542493

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$375 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CT Corporation System

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

1200 S. Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

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

PETER F. SOUZA
ASSISTANT SECRETARY

Date

3/3/04

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
VP	Patrick George	5093 Fountain St. N. Breslau, ON Canada	Breslau, ON Canada N0B 1M0
P	Eugene George	5093 Fountain St. N.	Breslau, ON Canada N0B 1M0
J	John Tabner	18 Corporate Woods Blvd	Albany, NY 12211

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:

Patrick George
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oct 14/03
Date

519-648-2285
Daytime Phone #

CR2E081 (10/02)