

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

02 AUG -2 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

Haw Key Builders Inc.

153000015195

2. Principal Office Address

1112 48th St

Suite, Apt. #, etc.

Box 6

City & State

Mangonia Park

Zip

33407

Country

FI

3. Mailing Office Address

1112 48th St

Suite, Apt. #, etc.

Box 6

City & State

Mangonia Park

Zip

33407

Country

FI

4. Date Incorporated or Qualified
To Do Business in Florida

1993

5. FEI Number

65-0392980

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

Dave Van Den Berg

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

6896 Paul Mar Dr

Suite, Apt. #, Etc.

City

Lantana

State

FL

Zip Code

33462

600006946736--7
-08/07/02--01055--003
****550.00 ***550.00*

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

Dave Van Den Berg

REGISTERED AGENT MUST SIGN

Date

7-31-02

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
<i>Pres</i>	<i>Dave Van Den Berg</i>	<i>6896 Paul Mar Dr</i>	<i>Lantana FI 33462</i>
<i>V.P.</i>	<i>Jeff Van Den Berg</i>	<i>15540 89th Pl. N.</i>	<i>Dorahatchee FI 33470</i>
<i>Sec.</i>	<i>Amy Van Den Berg</i>	<i>6896 Paul Mar Dr</i>	<i>Lantana FI 33462</i>

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:

Dave Van Den Berg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7-31-02

Daytime Phone #

561-585-1148

CR2E081 (9/01)

js 8/5/02