PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
99 MAR 31 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 93000059790

1. Corporation Name K.R.H. Construction, Inc.

Principal Place of Business
9999 N.W. 17th Street
Coral Springs, FL 33071

Mailing Address

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 9/6/99

2. New Principal Office Address, If Applicable
9999 N.W. 17th St.
Suite, Apt. #, etc.
City & State
Coral Springs, FL
Zip 33071 Country U.S.A.

3. New Mailing Office Address, If Applicable
9999N.W. 17th St.
Suite, Apt. #, etc
City & State
Coral Springs, FL
Zip 33071 Country U.S.A

4. Date Incorporated or Qualified To Do Business in Florida
08/20/93

5. FEI Number
65-0480919

Applied For ☐
Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐ **$8.75 Additional Fee required for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
Pres.	Kenneth Hill	9999 N.W. 17th Street	Coral Springs,FL 33071

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-04/07/99--01080--008
***1200.00 ***1200.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name
George Moxon
Street Address (P.O. Box Number is Not Acceptable)
735 N.E. 3rd Ave.
Suite, Apt. #, Etc.
City Ft. Lauderdale, State FL Zip Code 33304

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent George T. Moxon
REGISTERED AGENT MUST SIGN

Date March 26, 1999

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☒

(See other side for information on intangible tax.)

12. 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: Kenneth R. Hill
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth R. Hill, President 3/26/1999
Date

CR2E084 (1/98)