PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

99 APR 12 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000068777

1. Corporation Name
FISHER CONSTRUCTION GROUP, INC.

Principal Place of Business	Mailing Address
1604 BENT PINE WAY BRANDON, FL. 33511	P.O. Box 4226 BRANDON, FL. 33509

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

REINSTATEMENT 95-99

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
1604 BENT PINE WAY Suite, Apt. #, etc.	P.O. Box 4226 Suite, Apt. #, etc.
City & State BRANDON, FL	City & State BRANDON, FL
Zip 33511	Country USA	Zip 33509	Country USA

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number
59-3199944

6. CERTIFICATE OF STATUS DESIRED [ ] Applied For [ ] Not Applicable

$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
P/V/D	STEVE FISHER	1604 BENT PINE WAY ~~BRANDON, FL 33511~~	BRANDON, FL 33511

[illegible]
-04/15/99--01103--013
***1350.00 ***1350.00

8. Name and Address of Current Registered Agent

STEVE FISHER
1604 BENT PINE WAY
BRANDON, FL. 33511

9. Name and Address of New Registered Agent

Name: STEVE FISHER
Street Address (P.O. Box Number is Not Acceptable): 1604 BENT PINE WAY
Suite, Apt. #, Etc.:
City: BRANDON | State: FL | Zip Code: 33511

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: [signature] Date: 3/8/99

REGISTERED AGENT MUST SIGN

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes [ ] No [X]

(See other side for information concerning this 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: [signature] STEVE FISHER 3/8/99 813.661.0037
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Telephone #