PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED AND FILED
1999 July 12 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION FOR REINSTATEMENT

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

DOCUMENT # P94000069809

1. Corporation Name
T&L Contractors, Inc.

Principal Place of Business	Mailing Address
611 N Tampa Avenue	611 N Tampa Avenue

REINSTATEMENT 98-99 AR

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

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
611 N Tampa Avenue	611 N Tampa Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Orlando, Fl 32805	Orlando, Fl 32805
Zip: 32805 Country: United States	Zip: 32805 Country: US

4. Date Incorporated or Qualified To Do Business in Florida: 9/24/94

5. FEI Number: 59-3267639 ☐ 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
P	Loretta Tarlbert	611 N Tampa Avenue	Orlando, Fl 32805
~~V~~	~~Jackie Tarlbert~~	~~7709 Perugia Avenue~~	~~Orlando, Fl 32819~~ [redacted]

000003222070---9
-04/25/00--01010--002
****165.00 ****165.00

600002953246---6
-08/06/99--01039--001
****150.00 ****150.00

600002953246---6
-08/06/99--01039--002
****258.75 ****258.75

600002953246---6
-08/06/99--01039--003
****500.00 ****500.00

8. Name and Address of Current Registered Agent

Loretta Tarlbert
414 W South Street
Orlando, Fl 32801

9. Name and Address of New Registered Agent

Name: Loretta Tarlbert
Street Address (P.O. Box Number is Not Acceptable): 611 N Tampa Avenue
Suite, Apt. #, Etc.:
City: Orlando State: FL Zip Code: 32805

CR2E081 (12/98)

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: Loretta Tarlbert Date: 5-18-99
REGISTERED AGENT MUST SIGN

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.

Loretta Tarlbert Loretta Tarlbert 5-18-99 407-891-0681

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #