

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

**FILED**

01 APR 26 PM 1:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # PA4000072188

1. Corporation Name

ABBA CONTRACTING INC

2. Principal Office Address

8492 NW 15<sup>th</sup> COURT

Suite, Apt. #, etc.

City & State

CORAL SPRINGS, FL

Zip

33071

Country

USA

3. Mailing Office Address

← SAME

Suite, Apt. #, etc.

City & State

Zip

Country

**REINSTATEMENT**

99701

4. Date Incorporated or Qualified To Do Business in Florida

9/30/1994

5. FEI Number

65-0531448

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

600004155255

Name

EDWARD W. HAAS

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

8492 NW 15<sup>th</sup> COURT

Suite, Apt. #, Etc.

City

CORAL SPRINGS

State

FL

Zip Code

33071

05/11/01 - 01025 - 026  
\*\*\*1058.75 \*\*\*1058.75

LS

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

Edward Haas

REGISTERED AGENT MUST SIGN

Date

4-20-01

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       |
|--------|-----------------------------------|------------------------------------------------|--------------------------|
| Pres.  | Robbie Haas                       | 8492 NW 15 <sup>th</sup> COURT                 | CORAL SPRINGS, FL 33071  |
| V.P.   | DAVID W. PERRY                    | 5555 N. OCEAN BLVD                             | FT. LAUDERDALE, FL 33308 |
| Sec    | ISABEL PERRY                      | 5555 N. OCEAN BLVD                             | FT. LAUDERDALE, FL 33308 |
|        |                                   |                                                |                          |
|        |                                   |                                                |                          |

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:

ROBBIE HAAS  
Robbie Haas Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/2001

Date

(954) 752-5733

Daytime Phone #

CR2E081 (9/00)