PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 SEP 27 AM 8:47

DOCUMENT #

1. Corporation Name: BRITE PAINTING AND WATERPROOFING INC.

P94000086998

REINSTATEMENT 97-00

2. Principal Office Address	3. Mailing Office Address
510 NE 195 ST.	510 NE 195 ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: N. MIAMI FLORIDA	City & State: N. MIAMI FLORIDA
Zip: 33179 Country: U.S.A	Zip: 33179 Country: U.S.A

4. Date Incorporated or Qualified To Do Business in Florida: 11/28/94

5. FEI Number: 65-05-63139 ☐ 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: EDWIN MORALES

Street Address (P.O. Box Number is Not Acceptable): 510 NE 195 ST.

800003417148--0
--10/06/00--01087--016
***1200.00 ***1200.00

Suite, Apt. #, Etc.

City: N. MIAMI FL | State: FL | Zip Code: 33179

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: Edwin Morales — REGISTERED AGENT MUST SIGN

Date: 9/24/00

CR2E081 (9/99)

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
President	SHARON MORALES	510 NE 195 ST.	N. MIAMI FL. 33179
V. President	EDWIN MORALES	510 NE 195 ST.	N. MIAMI FL. 33179

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: Edwin Morales — EDWIN MORALES — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 9/24/00

Daytime Phone #: 305 651-2675