PLEASE READ AL	L INSTRUCTIONS BEFORE C	OMPLETING THIS FORM (b)
	FLORIDA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State  DIVISION OF CORPORATIONS	AND FILED 98 DEC 14 PM 1: 40
DOCUMENT # P95000055384  1. Corporation Name		SECRETARY OF STATE TALL AHASSEE, FLORIDA
DLR CONSTRUCTION, INC.		
Principal Place of Business Ma	failing Address	
	0525 SPRING HILL DR SPRING-HILL FL 34608 US	
If above addresses are incorrect in any way, line through	n Incorrect information and enter correction below.	REINSTATEMENT 98
2. New Principal Office Address, If Applicable  3. New Mailing Office Address, If Applicable  4. New Mailing Office Address, If Applicable  5. New Mailing Office Address, If Applicable  6. New Mailing Office Address, If Applicable  6. New Mailing Office Address, If Applicable  7. New Mailing Office Address, If Applicable  8. New Mailing Office Address, If Applicable  9. New Mailing Office Address, If Applicable  9. New Mailing Offic		4. Date Incorporated or Qualified To Do Business in Florida 07/18/1995
City & State Cit	IV& State VCY WEST F1.	5. FEI Number   Applied For   Not Applied be   Not Applied be
Zin W557 / 1   Zin Country   Zin   Z		6. CERTIFICATE OF STATUS DESIRED  58.75 Additional Fee regulred for a Certificate of Status
7. Names and Street Addresses of Each Officer and/or Dir Name of Officers		t 3 directors)
Title(s) and/or Directors	Officer and/or Director 3 (Do NOT Use Post Office Box Nun	
P PADRON, DAVID L	2288 EVONGLOW 3336 R	SPRING HILL FL-84609 KEY WEST, P)
VP PADRON, LAWERENCE	2288-EVONGLOW	SPRING HILL FL 34609
ST PADRON, ROSEMARY	2288 EVONGLOW	SPRING HILL FL 34609
		7000027169377 -12/21/9801003022 *****750,00 *****750,00:
		ph 12/17
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent		
NESSLER, PAUL H JR.	Street Address (P.G.	Box Number is Not Acceptable)  1 VI VI VI DR
SUITE 4 Suite, Apt. #, Etc.		
SPRING HILL FL 34606  CITY WAST FL SSOYD		
10. I, being appointed the registered agent of the ebove named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.  Signature of Registered Agent Registered		
11. This corporation owes or has paid 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 filling 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 find the same legal effect as if made under oath.		
SIGNATURE: 305 - 255 - 974 3 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date Daytime Phone #		

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