PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION



FLORIDA DEPARTMENT OF STATE Katherine Harris

OLSEP 21 PM 3: 29

REINSTATEMENT		ecretary of State ON OF CORPORATIONS	SECR	ETARY OF STATE HASSEE, FLORIDA
DOCUMENT # P	95000064892		(Miles)	
MG STEPHENS CONST	TRUCTION, INC.		7000046: -10/04/0 ****765.	23 8804 101068005 .00 ****765.00
2. Principal Office Address	3. Mailing Office	ce Address		•
1844 Nob Hill Road	1844 Nob	Hill Road	11007-20	OI UBR
Suite, Apt. #, etc	Suite, Apt. #, etc	c. –	1991-20	UI UDD
Suite #215	Suite #21	.5	4. Date Incorporated or Qualified To Do Business in Florida 08/22/1995	
City & State	City & State			
Plantation, Florida	a Plantatio	n, Florida	5. FEI Number 65-0604409	Applied For Not Applicable
Zip Country	Zip	Country	6.	
33322	33322		CERTIFICATE OF STATUS DESIRED [\$8.75 Additional Fee required for a Certificate of Status
;	7. Nan	ne and Address of Current R	egistered Agent	
Name SPIEGE	L & UTRERA, P.A.			·
Street Address (P.O.	Box Number is Not Acceptable)			
1840 So Suite, Apt, #, Etc.	outhwest 22 Street			
4th Flo	oor			
. City Miami			State Zip Code FL 3314	5
	d agent of the above named corporat	ion, am familiar with and accep	of the obligations of section 607.0505 or 617.050	03, F.S.

Date Stellenber 4, 20 Registered Agent By Natalia Utrera, VREGISPTES AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director Name of _ Titles · City / State / Zip --- Officers and/or Directors **PSTD** Stephens, Mark G. 1844 Nob Hill Road, Suite 215 Plantation, Florida 33322

10. I certify that I am an officer or director or the receiver or trustge 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 standards the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark G. Stephens, President