

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # P95000095176

1. Corporation Name

M.U.Y.U. CONSTRUCTION CORP.

Principal Place of Business

Mailing Address

8112 N.W. 164TH TERRACE  
MIAMI LAKES FL 33016  
US

8112 N.W. 164TH TERRACE  
MIAMI LAKES FL 33016  
US

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

Suite, Apt. #, etc. 7855 NW 185 ST

Suite, Apt. #, etc. 7855 NW 185 ST

City & State Hialeah FL

City & State Hialeah FL

Zip 33015 Country US

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REINSTATEMENT

4. Date Incorporated or Qualified  
To Do Business in Florida

12/13/1995

5. FEI Number

65-0630123

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	LEON, ULISES	14031 SW 38TH TER.	MIAMI FL 33175
P	LEON ULISES	7855 NW 185 ST	Hialeah FL 33015
			200003514612--3 -12/27/00--01069--019 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

LEON, ULISES  
14031 SW 38TH TER.  
MIAMI FL 33175

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

SIGNATURE REQUIRED

Date 12-08-00

REGISTERED AGENT MUST SIGN

11. 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:

SIGNATURE REQUIRED

12-08-00

Date

Daytime Phone #