

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SEAL AND STATE
TALLAHASSEE, FLORIDA

Corporation Name
CALLAHAN'S CONSTRUCTION CLEAN-UP INC.

2. Principal Office Address - No P.O. Box # 2722 N.W. 5 th TERR Suite, Apt. #, etc.	3. Mailing Office Address 2722 N.W. 5 th TERR Suite, Apt. #, etc.
--	--

City & State CAPE CORAL, FL		City & State CAPE CORAL, FL	
Zip 33993	Country LEE	Zip 33993	Country LEE

5 FBI Number
650679616

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 JEFFREY L. CALLAHAN	
Street Address (P.O. Box Number is Not Acceptable) 2722 N.W. 5 th TERR	
Suite, Apt. #, Etc	
City CAPE CORAL FL	State FL
Zip Code 33793	

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

Date 2/20/13

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Type	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
OPST owner	JEFF CALANAN	2722 N.W. 5 TH TERR	CAPE CORAL, FL 33993
	FEB 27 2013	REINSTATEMENT	11 - 13
	T. SCOTT		

10. E-mail Address:

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.55, F.S.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/13

PN

239 850-6643