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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2007 JAN 17 PM 12:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400086169514
01/25/07--01005--001 **485.00

DOCUMENT # PA6000028059

1. Corporation Name
The James Johnson Construction Co., Inc.

2. Principal Office Address
4532 SW 71 Ave.

Suite, Apt. #, etc.

City & State
Miami, FL

Zip Country
33155 USA

3. Mailing Office Address
P.O. Box 558196

Suite, Apt. #, etc.

City & State
Miami, FL

Zip Country
33255-8196 USA

REINSTATEMENT

CR2E081 (12/05)

05-07

4. Date Incorporated or Qualified To Do Business in Florida
04/01/1996

5. FEI Number
650735144

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
James H. Johnson Jr.

Street Address (P.O. Box Number is Not Acceptable)
4532 SW 71 Ave

Suite, Apt. #, Etc.

City
Miami

State Zip Code
FL 33155

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 _____
REGISTERED AGENT MUST SIGN

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
D	James Johnson	4532 SW 71 Ave	Miami, FL 33155

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 contained in Chapter 119, 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: Bradshaw Letsperch as Trustee 1/11/07 531-3999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

1/18/07

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The James Johnson Construction Co., Inc.
2. The principal office address: 4532 SW 71 Ave, Miami, FL 33155
3. The mailing address (if different): P.O. Box 558196, Miami, FL 33255-8196
4. Date of incorporation/qualification: 04/01/1996 Document number: P96000028059
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

James Johnson Jr.

4532 SW 71 Ave

Miami, FL 33155

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Bradshaw Lotspeich Esq.

443 Espanola Way, Suite 201

(P.O. Box NOT acceptable)

Miami Beach, FL 33139

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

BW Li

(Signature of an officer or director)

Bradshaw Lotspeich

(Printed or typed name and title)

as trustee
(Director)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

BW Li

(Signature of Registered Agent)

1/11/07

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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Bradshaw Lotspeich
ATTORNEY

305.531.3999

443 Espanola Way, Ste. 201 Miami Beach Florida 33139 • Fax 305.531.9993

January 10, 2007

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: The James Johnson Construction Co., Inc.

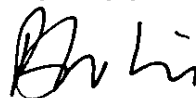
Dear Sir/Madam:

I am the attorney for The James Johnson Construction Co., Inc., and Mr. James Johnson, now deceased. The James Johnson Construction Co., Inc. is and has been in civil litigation since 2002, in that case styled, "The James Johnson Construction Co., Inc. v. United States Fidelity and Guaranty Company, and on September 16, 2005, it was administratively dissolved. In order for this case to proceed, on behalf of The James Johnson Co, Inc., the company needs to be reinstated.

Accordingly, we are requesting that the corporation be reinstated, and that the reinstatement fee be *waived*, as it did not receive a copy of the annual report notices in the year of the dissolution. I attach a completed Corporation Reinstatement form for your file and enclose the annual report fee and corporate supplemental fee for the years 2005, 2006, and 2007, in the amount of \$450.00, along with the fee, \$35.00, and completed form for the New Registered Agent and registered office.

Should you have any question or comment, please feel free to contact me.

Very truly yours,



Bradshaw Lotspeich.

enclosure