

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000041392

1. Corporation Name

FLORIDA SHELL CONSTRUCTION, INC.

2. Principal Office Address - No P.O. Box #

9000 Sheridan St

3. Mailing Office Address

9000 Sheridan St

Suite, Apt. #, etc.

Suite 173

Suite, Apt. #, etc.

Suite 173

City & State

Pembroke Pines, FL

City & State

Pembroke Pines, FL

Zip

33024

Country

BROWARD

Zip

33024

Country

BROWARD

7. Name and Address of Current Registered Agent

Name
Enrique Perez

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

11600 Taft St

Suite, Apt. #, Etc.

City
Pembroke Pines

State

FL

Zip Code

33026

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

REGISTERED AGENT MUST SIGN

Date 12/05/2007

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
PVST	Perez Enrique	11600 Taft St	PEMBROKE PINES, FL 33026

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/5/07

Daytime Phone #

410-8410

FILED

2007 DEC -6 PM 12:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300112903733
12/06/07--01050--008 **308.75

REINSTATEMENT
CR2E081 (1/07) 06-107

4. Date Incorporated or Qualified
To Do Business in Florida

05/08/1996

5. FEI Number

65-0678947

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

B. Mitchell DEC 6 2007