

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1997 DEC 23 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000101969

1. Corporation Name

Advanced Construction Service Group, Inc.

Principal Place of Business

Mailing Address

**9655 South Dixie Highway
Suite 206
Miami, Fl. 33156**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

9655 S. Dixie Highway

Suite, Apt. #, etc.

Suite 206

City & State
Miami, Fl.

Zip
33156

Country

3. New Mailing Office Address, If Applicable

same

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12-18-96

5. FEI Number

65-713265

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
P/D	Hiram Gonzalez	#206 9655 S. Dixie Highway	Miami, Fl. 33156
S/D	Mariangel Gonzalez	#206 9655 S. Dixie Highway	Miami, Fl. 33156

700002383707-6

-12/26/97-01098-005

***758.75 ***758.75

REINSTATEMENT

8. Name and Address of Current Registered Agent

**Amerilawyer Chartered
343 Almeria Ave.
Coral Gables, Fl. 33134**

9. Name and Address of New Registered Agent

Name

Mariangel Gonzalez

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

9655 S. Dixie Highway

Suite, Apt. #, Etc.

Suite 206

City

Miami,

State

FL

Zip Code

33156

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

Mariangel Gonzalez
REGISTERED AGENT MUST SIGN

Date **Dec. 11, 1997**

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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:

Hiram Gonzalez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-11-97

Date

305-662-6228

Daytime Phone #

CP2500C (12/96)