

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 15 AM 9:39

DOCUMENT # P97000006193

1. Corporation Name

CD DRYWALL GROUP, INC.

2. Principal Office Address

9510 NW 21 Manor

Suite, Apt. #, etc.

City & State

Sunrise, Florida

Zip

33322

Country

U.S.A.

3. Mailing Office Address

9510 NW 21 Manor

Suite, Apt. #, etc.

City & State

Sunrise, Florida

Zip

33322

Country

U.S.A.

REINSTATEMENT 01

**4. Date incorporated or Qualified
To Do Business in Florida**

01/22/1997

5. FEI Number

650719663

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

STEPHAN DUQUETTE

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

9510 NW 21 Manor

Suite, Apt. #, Etc.

City

Sunrise

200004653742-7
-10/25/01--01075--005
****750.00 ****750.00

State
FL

Zip Code
33322

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

STEPHAN DUQUETTE

Date

10/12/01

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
PD	RODOLPHE DUQUETTE	9510 NW 21 Manor	Sunrise, FL 33322
VD	STEPHANE DUQUETTE	9510 NW 21 Manor	Sunrise, FL 33322
STD	ROBERT CHARRON	9510 NW 21 Manor	Sunrise, FL 33322

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 under section 119.07(3)(f), 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:

STEPHAN DUQUETTE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/12/01

Daytime Phone #

954-746-8917