2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P97000022991 1. Entity Name PEACE CONSTRUCTION, INC.				SECRETARY OF STATE TALLAHASSEE FLORIDA TODI LEDISTETT
Principal Place	of Business	Mailing Address		TALLAHASSEE, FLORIDA
8101 PARK BLVD 8101 PARK BLVD				02/14/0801039018 **300.00
MIAMI, FL 33126		MIAMI, FL 33126		
2. Principal Pla	ce of Business - No P.O. Box #	3. Mailing Address		REINSTATEMENTO 1-0
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number Applied For
City & State		City & State		65-0711713 Not Applicable \$8.75 Additional
Zip	Country	Zip	Country	5. Certificate of Status Desired Fee Required
	6. Name and Address of Curr	ent Registered Agent	Name	7. Name and Address of New Registered Agent
RUIZ, ROBERT J			-	ess (P.O. Box Number is Not Acceptable)
8101 PARK	BLVD		Street Addre	SS (P.O. BOX Number 13 1401 / GCCP/CCCP)
MIAWI, FL	33120		City	FL Zip Code
l			\ '	stered agent, or both, in the State of Florida. I am familiar with, and accept
the obligation	named entity submits this stateme ons of registered agent.			
SIGNATURE_	Signature, typed or printed name of registered	agent and title if applicable. (NO	TE: Registered Agent signature	required when reinstating)
FIL	E NOW!!! FEE IS \$300.0	o		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS	AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	D	☐ Delete	TITLE	Change Li Addition
NAME	RUIZ, ROBERT J		NAME STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	8101 PARK BLVD MIAMI, FL 33126		CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	D	Delete	TITLE	Change Addition
NAME	RUIZ, ROBERTO N		NAME STREET ADDRESS	Į.
STREET ADDRESS CITY-ST-ZIP	8101 PARK BLVD MIAMI, FL 33126		CITY-ST-ZIP	- D Addition
TITLE	Walk date, 1 2 22	☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME Street Address	
STREET ADORESS			CITY-ST-ZIP	
CITY-ST-ZIP		☐ Dolete	TITLE	☐ Change ☐ Addition
TITLE NAME			NAME STREET ADDRESS	
STREET ADDRESS			CITY-ST-ZIP	
CITY-ST-ZIP		Delete	TITLE	☐ Change ☐ Addition
TITLE NAME		Car orginal	NAME	
STREET ADDRESS	1		STREET ADDRÉSS CITY-ST-ZIP	
CITY+ST-ZIP		Delete	TITLE	Change Addition
TITLE		FTT Delicie	NAME	
NAME STREET ADDRESS	,		STREET ADDRESS	
CITY-ST-ZIP	· ·		CITY-ST-ZIP	prairied in Chapter 119 Florida Statutes. I further certify that the information
12. I hereby indicate of the continue	y certify that the information supplied on this report or supplemental reportation or the receiver or trusted, or on an attachment with an ad-	ied with this filing does not quality eport is true and accurate and the empowered to execute this rep doess, with all other like empowe	y for the exemptions con nat my signature shall ha port as required by Chap red.	Intained in Chapter 119, Florida Statutes. I turther certify that the information live the same legal effect as if made under oath; that I am an officer or director oter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if
1	7	1		2/11/08 305-552-7777 Date Dayune Phone II
ISIGNA	TURE:	DED OR BRINTED NAME OF SIGNING OFF	OF DIRECTOR	Date Daytine Charles

APPHOVEL