PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 FEB 28 PM 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000052193

1. Corporation Name
DAMAS CONSTRUCTION COMPANY, INC

REINSTATEMENT 01-05

2. Principal Office Address	3. Mailing Office Address
473 CITRUS LN	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MAITLAND, FL	City & State
Zip: 32751 Country: USA	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: JUN. 12, 1997

5. FEI Number: 59-3453188 ☐ 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: RAFAEL DAMAS

Street Address (P.O. Box Number is Not Acceptable): 473 CITRUS LN

Suite, Apt. #, Etc.:

City: MAITLAND State: FL Zip Code: 32751

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 FEB. 23, 2005

CR2E081 (01/05)

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
PRES.	RAFAEL DAMAS	473 CITRUS LN, ~~MAITLAND~~ 32751	MAITLAND, FL 32751
			210004787360 2 03/08/05--01010--007 **750.00

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)(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: _____ RAFAEL DAMAS 02/23/05 cel (407) 617 3376 (407) 681 2950

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # OFC

DAMAS CONSTRUCTION COMPANY, INC.

General Contractors Lic.# 058911

Maitland, Feb. 23, 2005

To : Department of State
Division of Corporations

Dear Sirs:

Since 2000, I have not received any report form to pay for my company. I am sending this letter and the reinstatement for my corporation to be active .

All the information is in the annex document.

Thank you for your help.

Sincerely;

Rafael Damas

President.-

473 Citrus Lane, Maitland, Florida 32751 / Phone: (407) ~~657-6301~~ Fax: (407) ~~657-7207~~

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