

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 JUL 27 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000054622

1. Corporation Name

Triangle Steel Erectors, Inc.

2. Principal Office Address

12867 Boney Rd
Suite, Apt. #, etc.

3. Mailing Office Address

12867 Boney Rd
Suite, Apt. #, etc.

City & State

Jacksonville FL

City & State

Jacksonville, FL

Zip

32226 Duval

Country

Zip

32226 Duval

Country

4. Date Incorporated or Qualified
To Do Business in Florida

6/20/1997

5. FEI Number

593466515

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

Xiomara Caldwell

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

12867 Boney Rd

Suite, Apt. #, Etc.

City

Jacksonville

State

FL

Zip Code

32226

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

Xiomara Caldwell

REGISTERED AGENT MUST SIGN

Date

7/20/06

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
P	Daniel Caldwell	12867 Boney Rd	Jax. FL 32226
S	Xiomara Caldwell	12867 Boney Rd	Jax. FL 32226

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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:

Xiomara Caldwell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Xiomara Caldwell

Date

7/20/06

Daytime Phone #

(904)

714-0227

Triangle Steel Erectors, Inc.
12867 Boney Road
Jacksonville, Fl. 32226
(904) 714-0227 Fax:(904) 751-4739
Dan Cell# (904) 588-8577 Xiomara Cell# (904) 588-8603

July 21, 2006

P97000054622

Dear Sir or Madam:

We have not received any letters or post cards for renewal for 2001. I called your office and was told to send in \$900.00 and a note so that my late fees would be waived. Kindly call me at (904) 714-0227 if this is not enough to bring us current.

Thank you in advance for your help,



Xiomara Caldwell
Triangle Steel Erectors, Inc.