		PLEASE READ	ALL INST	RUCT	IONS	BEFORE C	OMPLET	ING#PIREPORM.		
Ą₽	DE	10 Comment		Sandra I	B. Mor			AND FILED		
REIN	ISTATE	MENT	7 DI	Secretary of State DIVISION OF CORPORATIONS			98 DEC -2 AMII: 27			
DOCUMENT # P9700062496 1. Corporation Name							SECRETARY OF STATE FALLAHASSEE, FLORIDA			
•		LING CONSTRUC	CTION, IN	IC.						
			•							
	lace of Busin		Mailing Addr					IR 1831/ 1881) 881) Banda Abdai Baira Baira didir baba Jahan Baira Ba	i 100:	
	THWEST 1215 CITY FL 33330		5143 SOUTHWEST 121ST AVE COOPER CITY FL 33330							
		Incorrect in any way, line thr								
		Address, If Applicable		New Mailing Office Address, If Applicable				Date Incorporated or Qualified To Do Business in Florida 07/18/1997		
Suite, Apt.			Suite, Apt. #, etc.				5. FEI Number	Applied	For	
City & Star	te 	<u> </u>	City & State			<u> </u>	65-080 4555 Not Applicable			
Zip Country		Zip		Country	′ 	CERTIFICATE	\$8.75 Additional Fee for a Certificate of	required Status		
7. Names	and Street Ad	idresses of Each Officer and/ Name of Officers	or Director (Flor	rida nonprofi		tions must list at lea				
Title(s) 1	and/or Directors C				Offi	cer and/or Director Post Office Box Nu		City / State / Zip		
D	BARNES,	MICHAEL	5143 SOUTHWES			ST 121ST AVE		COOPER CITY FL 33330		
							0	00002705419-		
							-12/08/9801005019			
	<u> </u>							****150.00 ****150		
-								ph w/n		
8. Name and Address of Current Registered Agent Name							9. Name and Address of New Registered Agent			
RARNES MICHAEL						Street Address (P	reet Address (P.O. Box Number is Not Acceptable)			
5143 SOUTHWEST 121ST AVE						Suite, Apt. #, Etc.			CR2E0	
COOPER CITY FL 33330						City State Zip Code				
10 bain	- ennaisted th	e registered agent of the abo	us parred come	rotion am fa	millorwit	•	ligations of Sasti	FL		
Signature of Registered	of 🖊	Michael To	SUPPE GISTERED AG	RE	QL	URED		Date 11-30-98		
		oration owes or ha Personal Propert		No X	(See other side for information on intangible tax.)					
this rein owed b	statement ap y the corporat	plication, the reason for disso	lution has been ames of individu	eliminated, t uais listed or	the corpor this form	rate name satisfies to a do not qualify for a	the requirements an exemption und	pter 607 or 617, F.S. I further certify that when f of section 607.0401 or 617.0401, F.S., that all fe ler section 119.07(3)(i), F.S. The information in	es	
J., 4113		and and and any org			-9			954-157-	-	

Daytime Phone #

SIGNATURE:

Division of Corporations, first and onl notice we have received. been instructed -Rock + Polling Construct