

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS



FILED

02 NOV 19 AM 8:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000063076

1. Corporation Name

TOWER CONSTRUCTION AND INSPECTIONS, INC.

Principal Place of Business

7750 JUNIPER STREET
MIRAMAR FL 33023

Mailing Address

7750 JUNIPER STREET
MIRAMAR FL 33023

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/22/1997

5. FEI Number

65-0769448

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PSTD	SPAULDING, CLIVE	7750 JUNIPER STREET	MIRAMAR FL 33023

8. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

CLIVE SPAULDING
7750 JUNIPER STREET
MIRAMAR FL 33023

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

~~SIGNATURE REQUIRED~~

REGISTERED AGENT MUST SIGN

Date

11/18/02

11. 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:

~~SIGNATURE REQUIRED~~

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/18/02 (954) 4383036

CR2040 (8/02)

FROM: TOWER CONSTRUCTION & INSPECTION

REQUEST TO WAIVE REINSTATEMENT FEE

I Filed my Annual Uniform Business Report in a timely manner. The report I sent you was generated from your ~~computer~~ website because I did not receive an original report. The computer printed report was not pre-printed with the information on your File, so I went ahead and fill in the blanks. A few weeks later I received a letter saying there is an error on the report regarding the registered Agent. I called the Uniform Business Report Dept. and a ^{Representative} ~~employee~~ told me to cross out the information that I wrote and in large letter write the word SAME in the Registered Agent ~~section~~. meaning that I want my registered Agent to remain the same. I did all of that and mailed the report ~~only~~ Only to find out that my company is administratively dissolved. After receiving this dissolution form I call your office once again and a representative told me to fill out the dissolution form and if I want to change the registered Agent I could plus I should write a letter to have the reinstatement fee waived.

Thanks