PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State DIVISION OF CORPORATIONS

P97000064734 **DOCUMENT #**

1. Corporation Name

SUNSHINE PAVING, INC.

Principal Place of Business

Mailing Address

1000 SW 19TH STREET FORT LAUDERDALE FL 33315

1000 SW 19TH STREET FORT LAUDERDALE FL 33315

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SECHETARY OF STATE FALLAHASSEE, FLORIDA

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If above addresses are incorrect in any way, line through incorrect information and enter correction below.					11/14/0201001012 **758.75				
2. New Principal Office Address, If Applicable 3. New Maili			ing Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida		07/25/1	997	
Bleg 3 Site 230			etc.	IC.		5. FEI Number 65-0936456		Applied For	
	Yanpand Beach, Fl	City & State	hatc		6.	03 0330430		Not Applicable	
330 6 Country Zip 33 17			O	Country	CERTIFICATE OF STATUS DESIRED S8.75 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		3	Street Address of Each Officer and/or Director		4	City / State / Zip	.	
PD	MONTES, DOMINIK		1000 SW 19TH STREET			FORT LAUDERDALE FL 33315			
PP	Montes, Dominik		750	E. SAMPLE RE	Bldg 3 Ste 230	Pomparo	Beach 330	6-L	
			-						
		-							
					· · · · · · · · · · · · · · · · · · ·				
	R. Name and Address of Course D								
8. Name and Address of Current Registered Agent Name					9. Name and Address of New Registered Agent				
DOMINIK, MONTES									
1341 34 3011 31 312 0					P.O. Box Number is Not Acceptable)				
				Suite, Apt. #, Etc.	Suite, Apt. #, Etc.				
				City			State Zip C	ode	
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 Washington Date 1/1/2/200 >									
REGISTERED AGENT MUST SIGN						/ /	1-		
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 filling 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 daid 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									

SIGNATURE:

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

I Did Not Recieve my Notice
to Renew.

The Address to Send the Renewal

The Address to Send the Renewal
is: Sunshine Paving Inc.
is: Sunshine Paving and
Bldg 3 Ste 230

Bldg 3 Ste 230

Bldg Beach, CL33064

Pompuno Beach,

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Thank low, Dominik Montes