			- DE 4D	ALL INCT		 ONG	DEFORE (INO TÙIÓ CO			
PLEASE READ ALL INSTRUCTIONS BEFORE APPLICATION FOR FOR Sandra B. Mortham Secretary of State								4 4 113000				
REINSTATEMENT DIVISION OF CORPORATIONS								98 DEC 22 PM 12: 34				
DOCUMENT # P97000097172								SECRETARY OF STATE				
D.J. RICHARDS CONSTRUCTION, INC.								SECRETARY OF STATE FALLAHASSEE, FLORIDA				
Principal Place of Business Mailing Add									HA TUUJA TUUJA BETAK UURKA ERKA	1 8 6 11 8 16 161 1 8 16 1 17	EN ENERGO (DES LACO	
9531 SEAGRAPE DRIVE SUITE 407				9531 SEAGRAPE DRIVE SUITE 407								
FORT LAUDERDALE FL 33324 FORT LAUDERDALE FL 33324								March 2000 日 華 賞 4	OTATER/	PAIT	au in	
	addresses an incipal Office		agh incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable				PEINSTATEMENT 98 4 Date incorporated or Qualified To Do Business in Florida					
Suite, Apt. #, etc.				Sulte, Apt. #, etc.				5. FEI Number		11/14/19	97 Applied For	
City & State				City & State				65-0195839 Not Appli			Not Applicable	
Zip		Country		Zip		Country	<i>'</i>		E OF STATUS DESIRED	\$8.75 Addit	ional Fee required ificate of Status	
	and Street A	Nami	of Officers	or Director (Flo	r (Florida nonprofit corporations must list at lea							
Title(s)	and/or Directors 3								4	City / State / Zip		
PSTD	D RICHARDS, DON J				9531 SEAGRAPE DR, STE 407				FORT LAUDERDA	LE FL 33324		
								700002725027—6 -12/29/98-01045022 ****750.00 *****750.00				
								St 12/28				
								7				
	8. Name and Address of Current Registered Agent Name								9. Name and Address of New Registered Agent			
	AMERILAWYER Street Address (P.								O. Box Number is Not Acceptable)			
343 ALMERIA AVENUE 95.37 CORAL GABLES FL 33134 Suite, Apt. #, E								P.O. Box Number is Not Acceptable) SEAGRAPE DE UE Culture 100				
City E. L. A. C. C.								PPRDAIR	<i></i>	State Zip Co		
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.												
Signature of Registered Agent Date 11/8/98 REGISTERED AGENT MUST SIGN												
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)												
12. 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 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: DE DON 5 P. CHARDS 11/18/98 954-414-0104 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #												