

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 MAR 14 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

0000019894

1. Corporation Name

Service Land Grading Inc
12119 Sheldon Road
Tampa Florida 33626

2. Principal Office Address

12119 Sheldon Road

3. Mailing Office Address

12119 Sheldon Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa Florida

City & State

Tampa Florida

Zip

33626

Country

Hillsborough

Zip

33626

Country

Hillsborough

REINSTATEMENT

09-00

4. Date Incorporated or Qualified
To Do Business in Florida

1998

5. FEI Number

59-3503714

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

Ernest Roman Gonzalez

000003180190-5

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

12119 Sheldon Road

03/22/00-01077-008

****900.00 ****900.00

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33626

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 3/6/00

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
Pres	Ernest R. Gonzalez	12119 Sheldon Rd	Tpa Fl 33626
VP	Kathy L. Gonzalez	12119 Sheldon Rd	Tpa Fl 33626

KE

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 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ernest R. Gonzalez

Date

3/6/00

Daytime Phone #

813 940 678