


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 06 FEB 20 PM 2:44

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000042174

1. Corporation Name
All Flax Construction Inc.

2. Principal Office Address <u>876 Burch Dr.</u>		3. Mailing Office Address <u>Same</u>	
Suite, Apt. #, etc. <u> </u>		Suite, Apt. #, etc. <u> </u>	
City & State <u>W.P.B. FL</u>		City & State <u>W.P.B. FL</u>	
Zip <u>33415</u>	Country <u>PB.</u>	Zip <u>33415</u>	Country <u>PB.</u>

REINSTATEMENT 04-06
 CR2E081 (8/05)

4. Date Incorporated or Qualified To Do Business in Florida yes

5. FEI Number 65-090-7609 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: Gene Manning

Street Address (P.O. Box Number is Not Acceptable): 876 Burch Dr.

Suite, Apt. #, Etc.: 200066686752

City: W.P.B. State: FL Zip Code: 33415

02/27/06--01013--003 **150.00

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: Gene Manning Date: 11-22-05

REGISTERED AGENT MUST SIGN

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
<u>Pres.</u>	<u>Gene Manning</u>	<u>876 Burch Dr.</u>	<u>W.P.B. FL 33415</u>
<u>Sec.</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>

200061744272
11/29/05--01012--023 **300.00

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 the directors 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: Gene Manning Date: 11-22-05 Daytime Phone #: 561-712-4608

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-06

ALL FLAGS CONSTRUCTION, INC.
876 Burch Drive
West Palm Beach, FL 33415
(561) 712-4608

Division of Corporations

I have moved twice from
3684 23rd Ave. Lake Worth, I did not
receive notices for corporation paper.
my new address is above. I wish to
be reinstated, I had enclosed a check
for 150.⁰⁰ per phone conversation

Thank you

Gene Manning