

APPROVED
AND
FILED

03 SEP 29 PM 3:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100023523144
10/03/03--01002--017 **758.75

REINSTATEMENT 2003

CORPORATION
REINSTATEMENT



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

DOCUMENT # P980000098137
1. Corporation Name:
Global Developer and Construction, Inc

2. Principal Office Address
6780 CORAL WAY
Suite, Apt. #, etc.
City & State
MIAMI, FL
Zip Country
33155

3. Mailing Office Address
6780 CORAL WAY
Suite, Apt. #, etc.
City & State
MIAMI, FL
Zip Country
33155

4. Date Incorporated or Qualified
To Do Business in Florida 11/20/1998
5. FEI Number 65-0876694
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 ELIO VAZQUEZ, ESQ.
Street Address (P.O. Box Number is Not Acceptable)
6780 CORAL WAY
Suite, Apt. #, Etc.
City MIAMI
State FL Zip Code 33155

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0603, F.S.
Signature of Registered Agent: [Signature] Date: 9/25/03
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
P/D	ANGEL CRUZ	6780 CORAL WAY	MIAMI, FL 33155
S/T	ELIO VAZQUEZ	6780 CORAL WAY	MIAMI, FL 33155

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] 9/25/03 305444-5767
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #