

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P99000002022

1. Corporation Name

U.S. BUILDING, CORP.

2. Principal Office Address

28102 S.W. 140 Court
Miami, FL 33033
Suite, Apt. #, etc.

City & State

Miami, FL

Zip 33033

Country USA

3. Mailing Office Address

16449 S.W. 95 Street
Miami, FL 33196
Suite, Apt. #, etc.

City & State

Miami, FL

Zip 33196

Country USA

4. Date incorporated or Qualified
To Do Business in Florida

01/07/1999

5. FEI Number

650935884

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7.73. A fee of \$100 is required for a Certificate of Status.

7. Name and Address of Current Registered Agent

Name

Noel J. Tarek

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

16449 S.W. 95th Street

Suite, Apt. #, Etc.

City

Miami

State
FLZip Code
33196

REINSTATEMENT 03

TS

Circled (10/02)

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

Date 10/29/03

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
PD	Noel J. Tarek	16449 S.W. 95th St.	Miami, FL 33196
STD	Osman Kashlan	8 Ellen Court	Ocean, N.J. 07712
D	Hicham Alascha	8 Ellen Court	Ocean, N.J. 07712

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)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Noel J. Tarek

10/29/03 (786) 256-4813

Date

Daytime Phone #