

PLEASE READ ALL INSTRUCTIONS BEFORE COM

FILED
Mar 11, 2002 8:00 am
Secretary of State

APPLICATION 01102 W32	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
REINSTATEMENT	

DOCUMENT # P99000045145

1. Corporation Name
QUANTUM CONCRETE CONSTRUCTION, INC.

Principal Place of Business 1020 ALFRED DRIVE ORLANDO FL 32810	Mailing Address 1020 ALFRED DRIVE ORLANDO FL 32810
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country	3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country
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4. Date Incorporated or Qualified To Do Business in Florida 05/09/1999
5. FEI Number 59-3591822
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$375. Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	SAWCHUK, KEVIN	1020 ALFRED DR.	ORLANDO FL 32810
T	WOODS, OWEN	2007 CORNELL AVE.	WINTER PARK FL 32789

700005145257-4
 -03/22/02--01005--015
 *****300.00 *****300.00

AB 3/19

8. Name and Address of Current Registered Agent SAWCHUK, KEVIN LEE 1020 ALFRED DRIVE ORLANDO FL 32810	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code FL
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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 *Kevin Sawchuk* Date **3-6-02**
 REGISTERED AGENT MUST SIGN

11. 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: *Kevin Sawchuk* **Kevin Sawchuk** **3-6-02** **407-628-1403**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E040 (8/01)