

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR



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

DOCUMENT # **P99000048275**

1. Corporation Name

**P&LR CONSTRUCTION, INC.**

Principal Place of Business

Mailing Address

P O BOX 770085  
CORAL SPRINGS FL 33077-0085

P O BOX 770085  
CORAL SPRINGS FL 33077-0085

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

05/24/1999

5. FEI Number

65-0920683

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	LUM, PETER LEE	P O BOX 770085	CORAL SPRINGS FL 33077
			400004672804--0 -11/08/01--01061--016 *****150.00 *****150.00
			400004672804--0 -11/08/01--01061--017 *****8.75 *****8.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LUM, PETER LEE  
647 N.W. 113 TERR.  
CORAL SPRINGS FL 33307

Name

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

Suite, Apt. #, Etc.

City

State  
**FL**

Zip Code

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

REGISTERED AGENT MUST SIGN

Date

10/23/01

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:

**SIGNATURE REQUIRED**  
LUM, PETER LEE

Date

Daytime Phone #

10/23/01

(954) 8181765

FILED

01 OCT 24 PM 5:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CR2E040 (8/01)



P & LR Construction, Inc.



(954) 753 2360



10/23/2001 11:01 AM

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## **P & LR CONSTRUCTION, Inc.**

Phone (954) 818 1765

P.O. Box 770085,  
Coral Springs FL 33077/0085  
October 23, 2001

Attn: Florida Department Of State  
Katherine Harris  
Secretary Of State

To: Division Of Corporations  
Courier Service Address, Division Of Corporations  
409 East Gaines St., Tallahassee, FL 32399

Re: Filing Uniform Business Report

Dear Madam,

First, I wish to say that I commend the wonderful patience and assistance by the lady who attended to me today. My ten year old son decided to fall out of a tree and broke his arm and fractured his hip on Sunday.

I did not file the Uniform Business Report as I normally expect this in the mail and this raises a flag for me to attend to anything I get in the mail.

I did not get any of the two notices that I should have received for filing the Uniform Business Report.

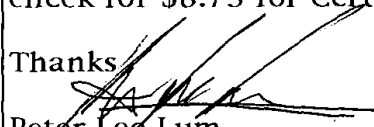
I will be most grateful if you may grant me a waiver on the reinstatement fee. I want extend appreciation to any inconveniences to your staff in processing my humble request.

Please find enclosed:

check for \$150.00 for filing fee

check for \$8.75 for Certificate Of Status

Thanks

  
Peter Lee Lum.  
President