PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM:

APPLICATION FÖR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P99000051928

1. Corporation Name

RODRIGUEZ'S CONCRETE & CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

606 ENCINO WAY

Zip . .

ALTAMONTE SPRING FL 32714

606 ENCINO WAY ALTAMONTE SPRING FL 32714

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

0.41. 5: 100	
New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

03 MAR -5 AM 10: 31

SECRETARY OF STATE

REINSTATEMENT 02-03

ĺ	07/10	102	90192	025	\$1/50
Date Incorporated or Qualified To Do Business in Florida O6/07/1999					

ALTAMONTE SPRING FL 32714

5. FEI Number

59-3587539

Applied For Not Applicable

\$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED for a Certificate of Status

City / State / Zip

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) and/or Directors

Officer and/or Director

P RODRIGUEZ, JOSE **606 ENCINO WAY**

٧ RODRIGUEZ, REYMUNDO 606 ENCINO WAY

ALTAMONTE SPRING FL 32714

400010097094

9. Name and Address of New Registered Agent

8. Name and Address of Current Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State 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. or 617.0505, F.S.

Signature of

RODRIGUEZ, JOSE

606 ENCINO WAY

ALTAMONTE SPRING FL 32714

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.

TATEREQUIRED

TYPED OF PHINTED NAME OF SIGNING OFFICER OR DIRECTOR