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## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		A DEPARTMENT  Jim Smith  Secretary of Star  VISION OF CORPORAT	le	FILED 02 NOV 20 AM 10: 0				
DOCUMENT # \$9900	SECRETARY OF STATE FALLAHASSEE, FLORID							
MAC CONCRET	ETR	AMING	INC	:				
2. Principal Office Address 21930 SW 108 <sup>TM</sup> CT		Office Address						
Suite, Apt. #, etc.	Suite, Apt. #	l, etc.		4. Date Incon	porated or Quel	thed . I	<del>- , -</del>	
City & State	City & Stale		<u> </u>	To Do Bus	ineas in Florida		27/199	9
MIAMI, FLORINA		11		5. FEI Number	09365	95	<del></del>	ed For policable
33170 Country V.S.A	Zip	Country	١	6. CERTIFICATE	OF STATUS DE		100(11	, production of the control of the c
Name	7.	Name and Address of	Current Registere	d Agent		· -		
Street Address (P.O. Box Number Is 21930 Swlee, Apt. #, Etc.  City MIYAN 1  8. 1, being appointed the registered agent of the ab	Not Acceptable					°3317	0	- 1 (c
Signature of Registered Agent Makerald	John	GENT MUST SIGN	and accept the obt	igations of section	on 607.0505 or	. 1.2	07	CRZED81 (9/01
9. Names and Street Addresses of Each Officer at	d/or Director (Fi	orida nonprofit corporatio	ons must list at leas	et 3 directors)	<del>-</del>			
Titles Name of Officers and/or Directors		Street Address of Each Officer and/or Olrector			City / State / Zip			
PSTO FICHONAUD, JOHN	uson	21930 SW	108 ca	NCT	MAMI	fl	3317 (	2
				11/2	<b>510156</b> 3/10201	<b>909</b> \$ 02800	<b>3245</b> 96 **30	0.00
10. I certify that I am an officer or director or the recibility reinstatement application, the reason for director	iver or trustee el	impowered to execute this	s application as pro	ovid <b>ed</b> for In cha	oter 607 or 617,	F.S. I further o	erlify (hat when	filing
this reinstatement application, the reason for dis owed by the corporation have been paid and the on this application is true and accurate, and my sold supplication is supplication in the supplication in the supplication is true and accurate, and my sold supplication is supplication.	names of individual in	n eliminated, the corpora duals fisted on this form d ave the same legal effect	to name satisfies the control quality for an as if made under control of the cont	no requirements exemption unde path.	of earlion RO7 (	1401 22017 044	14 CC 46-4-8	4000

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Florida Department of State Division of Corporations

Re: MAC CONCRETE TRAINING, INC. Doc# P99000066305

To Whom It May Concern,

As per my telephone conversation with your office, with this letter I am asking that the penalty please be waived for the corporation. We did not receive notification in the mail.

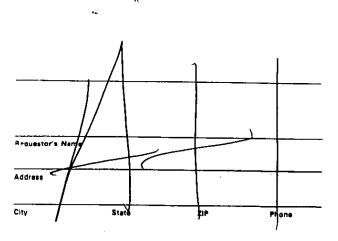
Thanking you in advance for your time and consideration.

Sincerely,

McDonald Johnson President/ Director



**Charter Number Only** 



VALIDATION ONLY

CORPORATION(S) NAME

	Mac	Concrete	Training.
		INC.	
<del></del>	····		.0
			02 . 01WS/C+
( ) Profit ( ) NonProfit	(	) Amendment	9 8
( ) Foreign	(	) Dissolution	( ) Mark
( ) Limited Partnership	(	) Annual Report ) Reservation	( ) Other Supplemental ( ) Change of Registered Agent
( ) Certified Copy	(	) Photo Copies	( ) Certificate Under Seal
( ) Call When Ready Walk In	( ) Will Wait	) Call If Problem	( ) After 4:30 ( ) Mail Out

Timpiire Toll Free: 1-800-432-3028

Name
Availability
Document
Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier