	ALL INSTRUCTIONS	1	OMPLETI	NG THIS FORM.
APPLICATION	FLORIDA DEPARTMEN	1		•
FOR	Katherine Ha Secretary of S	1		FILED
REINSTATEMENT	DIVISION OF CORPOR		<i></i>	SECRETARY OF STATE
DOCUMENT # V26	217			TAISIUR UF CURPORATIONS
1. Corporation Name		0		00 JUN 12 PM 1:52
1. Corporation Name Aetistic Concrete	of Florida,	anc		
,				
Principal Place of Business Mailing Address				
7921 NW South River Dr.				
# 107 Undley FL 33166				
MEUICHI			DEIN	CTATEMENT 2000
If above addresses are incorrect in any way, line thro 2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If A			prated or Qualified
Suite, Apt. #; etc.	Suite, Apt. #, etc.		To Do Business in Florida	
City & State	City & State	,	5. FEI Number	0410 888 Applied For Not Applicable
Zip Country	Zip	/	6.	\$8.75 Additional Fee required
				OF STATUS DESIRED L
7. Names and Street Addresses of Each Officer and/ Name of Officers	Stre	eet Address of Each	st 3 directors)	
Title(s) and/or Directors	Off 3 (Do NOT Us	icer and/or Director se Post Office Box No	umbers)	City / State / Zip
D. D. DI.	1-500-	CC) 70	1.01	10m° FT 37113
President Kaul Kodrig	uez 6240	SUC I	1.C1.	Miane, 7 1- 33143
Vice Dogue Altur	ie 7999	\$4) 58	91	MPami, H 33/43
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			11/6	20
8. Name and Address of Current	Registered Agent		9. Name and A	ddress of New Registered Agent
Paul Rodriguez Name				(15,68
8. Name and Address of Current Registered Agent Raul Rodriguez 6240 Sev 79 ct Miamin-EL_33143		Name Street Address (P.O. Box Number is Not Acceptable)		
5240 Suite, Apt. #, Etc.				
Meeting		City	<u> </u>	State Zip Code
10. I, being appointed the registered agent of the abo	ve named corporation, am familiar wi	th and accept the ob	ligations of Secti	
Signature of	Daul F	Odrigue	22	Date 6-6-00
Registered Agent RE	EGISTERED AGENT MUST SIGN			
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes No (See other side for information on intangible tax.)				
12. 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 discolution 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.				
	grindere origin nave the same legal ent			
NORUS Alture 6-6-00 305/888-9500				
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #				