

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

02 JUN -4 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V70673**

1. Corporation Name

STARR CONSTRUCTION SYSTEMS, INC.

2. Principal Office Address

5570 AMOROSO DR.

Suite, Apt. #, etc.

City & State

FT. MYERS, FL.

Zip

33919

Country

LEE

3. Mailing Office Address

5570 AMOROSO DR.

Suite, Apt. #, etc.

City & State

FT. MYERS, FL.

Zip

33919

Country

LEE

4. Date Incorporated or Qualified
To Do Business in Florida

10-7-92

5. FEI Number

01-0664690

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 99-10

7. Name and Address of Current Registered Agent

Name

JEFFERY C. STARRAK

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

5570 AMOROSO DR.

Suite, Apt. #, Etc.

City

FT. MYERS, FL

State

FL

Zip Code

33919

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Jeffery C. Starrak
REGISTERED AGENT MUST SIGN

Date **5/30/02**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES.	JEFFERY C. STARRAK	5570 AMOROSO DR.	FT. MYERS, FL. 33919

10. 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:

Jeffery C. Starrak

JEFFERY C. STARRAK

Date

5/30/02

Daytime Phone #

941-565-2240

CR2081 (9/01)