


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>APPLICATION FOR REINSTATEMENT</b> 		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS		1997 JUN 25 PM 1:15 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>DOCUMENT # 698216</b> 1. Corporation Name <b>URO-TILE, INC.</b>					
Principal Place of Business <b>302 South Federal Hwy.          Boca Raton, FL 33432</b>		Mailing Address <b>302 South Federal Hwy.          Boca Raton, FL 33432</b>			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida <b>Jan 9/79 8-10-81</b>	
				5. FEI Number <b>59-2116523</b>	
				Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
President	Henry Schiffer	21835 EL Bosque Way	Boca Raton, FL 33428
Vice Pres	Cecilia Schiffer	21835 EL Bosque Way	Boca Raton, FL 33428
Secretary	Helena Schiffer	6541 Via Regina	Boca Raton, FL 33433
Treas.	Cecilia Schiffer	21835 EL Bosque Way	Boca Raton, FL 33428

<b>REINSTATEMENT</b>	
8. Name and Address of Current Registered Agent <b>Henry Schiffer          21835 EL Bosque Way          Boca Raton, FL 33428</b>	
9. Name and Address of New Registered Agent Name <b>Cecilia Schiffer</b> Street Address (P.O. Box Number is Not Acceptable) <b>21835 EL Bosque Way</b> Suite, Apt. #, Etc. City <b>Boca Raton</b> State <b>FL</b> Zip Code <b>33428</b>	

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: *Cecilia Schiffer* REGISTERED AGENT MUST SIGN Date: **June 24/97**

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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 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 118.07(3)(b), 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.

**10000225151-5**  
**-06/27/97-01089-003**  
**\*\*\*915.00 \*\*\*915.00**

SIGNATURE: *Helena Schiffer* Helena Schiffer June 24/97 561-394-6701  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CPREC040 (12/95)