2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 19, 2004
Secretary of State

DOCUMENT# P02000102624

Entity Name: RUIZ LINARES TILE, CORP.

Current Principal Place of Business:

825 E 5 ST
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

825 E 5 ST
HIALEAH, FL 33010

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUIZ, ORESTE
825 E 5 ST
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: RUIZ, ORESTE
Address: 825 E 5 ST
City-St-Zip: HIALEAH, FL 33010

Title: DV ( ) Delete
Name: RUIZ, OSMANY
Address: 825 E 5 ST
City-St-Zip: HIALEAH, FL 33010

Title: DS ( ) Delete
Name: LINARES, TERESITA
Address: 825 E 5 ST
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ORESTE RUIZ DP 11/19/2004
Electronic Signature of Signing Officer or Director Date