

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

APPROVED AND FILED

97 NOV -7 AM 9:46

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P93000043720**

1. Corporation Name

SELECT FLOOR COVERING, INC.

Principal Place of Business

2241 TRADE CENTER WAY
 NAPLES FL 33942

Mailing Address

2241 TRADE CENTER WAY
 NAPLES FL 33942



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

~~6421 Topaz Court~~

3. New Mailing Office Address, If Applicable

~~6421 Topaz Court~~

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

~~Fort Myers, FL~~

City & State

~~Fort Myers, FL~~

Zip

~~33912~~

Country

~~Lee~~

Zip

~~33912~~

Country

~~Lee~~

4. Date Incorporated or Qualified To Do Business in Florida

06/14/1993

5. FEI Number

65-0423505

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$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
/PV C	KINTZELE, JAMES R	922 S TOWN & RIVER DR	FT MYERS FL 33919
/VP P	KINTZELE, KEVIN	1260 BILTMORE DR	FORT MYERS FL
STD	KINTZELE, SHEILA	922 S TOWN & RIVER DR	FT MYERS FL 33919

8000002345238-8
 -11/12/97--01105--017
 ***750.00 ***750.00

JA 11/10

8. Name and Address of Current Registered Agent

KINTZELE, JAMES R
 2241 TRADE CENTER WAY
 NAPLES FL 33942

9. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 Suite, Apt. #, Etc.
 City State Zip Code
 FL

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

James R. Kintzele

BE REGISTERED AGENT MUST SIGN

Date 11-4-97

11. This corporation owes or has paid 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 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:

James R. Kintzele
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-4-97 941-939-9663
 Date Daytime Phone #

CR2ED40 (8/97)