

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<p>APPLICATION FOR REINSTATEMENT</p> <p style="font-size: 2em; font-weight: bold; color: black;">98 AR</p> <p style="text-align: right;">FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS</p>	<p>DO NOT WRITE IN THIS SPACE</p> <p style="font-size: 2em; font-weight: bold;">FILED</p> <p>98 NOV 25 AM 8:35</p>
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<p>Head Instructions on Other Side Before Making Entries Make Check Payable To: Department of State</p>	
<p>1. Name and Mailing Address of Corporation: DOCUMENT # PA7000071718</p> <p>Designs of Coral Springs, Inc. 8-21 Morningside Dr Coral Springs, FL 33076</p>	<p>2. If Address in Block 1 is incorrect in any way, enter the correct address below:</p> <p style="text-align: center; font-weight: bold;">TALLAHASSEE, FLORIDA</p> <p>Address: 10542 Wiles Rd 33076</p> <p>City and State: Coral Springs, FL Zip Code</p> <p>3. If Principle Office Address is different from mailing address, enter address below:</p> <p>Address: _____</p> <p>City and State: _____ Zip Code: _____</p>

4. Date Incorporated or Qualified To Do Business in Florida Aug. 19, 1997	5. FEI Number 650774442	FEI Number Applied For	6. \$8.75 Additional Fee required for a Certificate of Status
		FEI Number Not Applicable	CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>

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
D'P	Rahamat Mohammed	10542 Wiles Rd	Coral Springs, FL 33076
D'VP	Assad Mohammed	10542 Wiles Rd	Coral Springs, FL 33076
			500002702075--4 -12/03/98--01082--022 ****150.00 ****150.00

REGISTERED AGENT INFORMATION	9. If changed, new registered agent office
8. Name and Address of Current Registered Agent	
<p>Rahamat Mohammed 10542 Wiles Rd Coral Springs, FL 33076</p>	<p>Name: _____</p> <p>Street Address (Do NOT Use P.O. Box Number): _____</p> <p>Street Address (Do NOT Use P.O. Box Number): _____</p> <p>City: _____ State: FL Zip: _____</p>

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: Rahamat Mohammed Date: 10-30-98

REGISTERED AGENT MUST SIGN

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box (See other side for additional information.)

12. 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.)

13. 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., and that all fees owed by the corporation have been paid. 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 of Officer or Director: Rahamat Mohammed Date: 10-30-98 Daytime Phone #: 954-252-5647

Typed or printed name of signing officer or director: Rahamat Mohammed

CR2E040 (09/92)



of Coral Springs, Inc.

CARPET • CERAMIC TILE • WALLPAPER • CUSTOM INTERIOR DESIGN

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October 30, 1998

Name
Address
City, State or Province Postal Code

To Whom It May Concern,

The Company in question, Designs of Coral Springs, Inc. place of business was at 10542 Wiles Road, Coral Springs. The company has been here since April of 1997. In the interim I have not recieved any corporation papers. In the future I would like to recieve any paperwork concerning the business at the Wiles Road address.

Thank You

Rahamat Mohammed