

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

CORPORATION REINSTATEMENT

TEMBOARD SALES INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,350.00

Electronic Filing Menu

Corporate Filing Menu

Help

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JUN 12 PM 3:02

REINSTATEMENT
CR2E01 (12/04)

Ks
05-09

DOCUMENT # F00000006664

1. Corporation Name

Tombard Sales Inc.

2. Principal Office Address - No P.O. Box #
800 Rene-Levesque Blvd.

3. Mailing Office Address
800 Rene-Levesque Blvd.

Suite, Apt. #, etc.

Suite 1050

Suite, Apt. #, etc.

Suite 1050

City & State

Montreal, Quebec

City & State

Montreal, Quebec

Zip

H3B 1X9

Country

Canada

Zip

H3B 1X9

Country

Canada

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

06-1414750

Applied For

No Application

6. CERTIFICATE OF STATUS DESIRED

§175 Additional Fee Required
for Certificate of Status

7. Name and Address of Current Registered Agent

Name

C T Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

32804

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, hereby accept the obligations of section 807.0605 or 817.0503, F.S.

Signature of
Registered Agent

Daphne Dwyer

Assistant Secretary

Date 6/10/2009

REGISTERED AGENT MUST SIGN

9. Name 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
Director	Chris Black	405 The West Mall, Suite 800	Etobicoke, Ontario M9C 5J1, Canada
Director	Antonio Fratanni	800 Rene-Levesque Blvd., Suite 1050	Montreal, Quebec H3B 1X9, Canada
President	Chris Black	405 The West Mall, Suite 800	Etobicoke, Ontario M9C 5J1, Canada
Vice-President and Secretary	Antonio Fratanni	800 Rene-Levesque Blvd., Suite 1050	Montreal, Quebec H3B 1X9, Canada
Treasurer	Stephen J. Norris	800 Rene-Levesque Blvd., Suite 1050	Montreal, Quebec H3B 1X9, Canada

10. I certify that I am an officer or director of the taxpayer or trustee empowered to execute this application as provided for in Chapter 807 or 817, 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 807.0401 or 817.0401, F.S., that all taxes owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information furnished on this application is true and correct, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

ANTONIO FRATANNI
SIGNATURE AND TITLE OF REGISTERED OFFICER, DIRECTOR

Date June 9, 2009

514-876-2810
Daytime Phone #