

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **K41561**

1. Corporation Name
GOLDEN TILE, INC.

FILED

97 JAN 15 AM 10:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

C/O GILBERTO NARANJO

C/O GILBERTO NARANJO

2555 W. 65 ST

2555 W. 65 ST

MIAMI FL 33016

MIAMI FL 33016

US NORTH MIAMI, FL 33181

US NORTH MIAMI, FL 33181

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

10/27/1988

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0081067

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PD	NARANJO, GILBERTO	2555 W. 65 ST. 13200 KEYSTONE TERR NORTH MIAMI, FL 33181	MIAMI FL NORTH MIAMI, FL 33181

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

NARANJO, GILBERTO

2555 W. 65TH ST.

MIAMI FL 33016

13200 KEYSTONE TERR
NORTH MIAMI, FL 33181

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

Gilberto Naranjo
REGISTERED AGENT MUST SIGN

Date 01/13/97

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 119.07(3)(l), 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:

Gilberto Naranjo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/13/97 305-893-2320