


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 OCT 12 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L71732**
1. Corporation Name
RPM TILE AND MARBLE, INC.

REINSTATEMENT 00-05
CR2E081 (8/05)

2. Principal Office Address 6237 MICHAEL STREET Suite, Apt. #, etc.		3. Mailing Office Address SAME Suite, Apt. #, etc.	
City & State Jupiter FL. PALM BEACH GARDENS, FL		City & State	
Zip 33458 33448	Country USA	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida 2/20/2002	
5. FEI Number 650233623	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name **RICHARD MICHAEL**

Street Address (P.O. Box Number is Not Acceptable) **6237 MICHAEL STREET**

Suite, Apt. #, Etc.

City ~~PALM BEACH GARDENS~~ **Jupiter** State **FL** Zip Code **33458**

700060548897
10/12/05--01049--011 **150.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent *Richard Michael* Date 10-5-05

REGISTERED AGENT MUST SIGN

9. Names 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
PRES	RICHARD MICHAEL	6237 MICHAEL STREET	Jupiter FL. 33458 PALM BEACH GARDENS, FL 33448
VP	RICHARD MICHAEL	" " "	" " "
TRES	RICHARD MICHAEL	" " "	" " "
SEC	RICHARD MICHAEL	" " "	" " "

10/10/05

10. 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: *Richard Michael* Date 10-5-05 Daytime Phone # 561/212-0568

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR