

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2006 DEC 29 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L80219

1. Corporation Name:

ELITE FOLIAGE, INC.

2. Principal Office Address:
1239 ALTON ROAD

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MIAMI BEACH, FL

City & State

Zip
33139Country
USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida 06/12/19905. FEI Number
59-3052820Applied For
Not Applicable6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
THOMAS G. SHERMAN, ESQ., P.A.Street Address (P.O. Box Number is Not Acceptable)
90 ALMERIA AVENUE

Suite, Apt. #, Etc.

City
CORAL GABLESState Zip Code
FL 33134

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

REGISTERED AGENT MUST SIGN

Date 11/29/06

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PS	GUS GUTIERREZ	1239 ALTON ROAD	MIAMI BEACH, FL 33139

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 contained in Chapter 119, 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/29/2006

Date

305-532-7939

Daytime Phone #

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Elite Foliage, Inc.

1239 Alton Road
Miami Beach, FL 33139
Office#: 305-532-7939

November 29, 2006

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

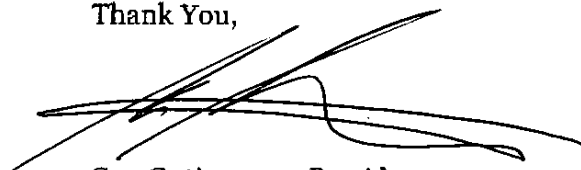
Re: ***Elite Foliage, Inc.***
Document No. L80219

Dear Sir/Madam:

This letter shall confirm that our office has not received the Notice for Annual Report. Thus, the reinstatement fee should be \$300, which payment is enclosed.

Should you have any questions, or if we can be of further service, please do not hesitate to contact us.

Thank You,



Gus Gutierrez as President
of Elite Foliage, Inc., a
Florida corporation

Page 3 of 3

ELITE FOLIAGE, INC.
1239 Alton Road
Miami Beach, FL 33139
Office#: 305-532-7939

December 29, 2006

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

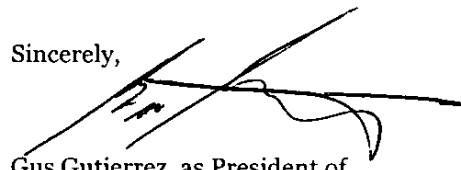
Re: Elite Foliage, Inc.
Document No. 680219

Dear Sir/Madam:

This letter shall confirm that our office has not received the Notice for Annual Report for the year 2005 and 2006. Thus, the reinstatement fee should be \$300, which payment is enclosed.

Please call me if any questions arise. Thank you.

Sincerely,



Gus Gutierrez, as President of
Elite Foliage, Inc., a Florida
corporation