

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 DEC 23 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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12/24/02--01043--011 **150.00

DOCUMENT # P0000002151

1. Corporation Name
AURELIO CARPET INC

2. Principal Office Address
6323 S.W. 1st Street

3. Mailing Office Address
6323 S.W. 1st Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Margate Florida

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Margate Florida

4. Date Incorporated or Qualified To Do Business in Florida 01/07/2000

5. FEI Number 65-0971627

Applied For
Not Applicable

Zip 33068 Country U.S.A.

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6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: AURELIO A. BENJUMEA
Street Address (P.O. Box Number is Not Acceptable): 6323 S.W. 1st Street
Suite, Apt. #, Etc.:
City: Margate State: FL Zip Code: 33068

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: [Signature] Date: 8/14/2002
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
DP	AURELIO A. BENJUMEA	6323 SW 1st STREET	MARGATE FLORIDA 33068

0. 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: [Signature] AURELIO A. BENJUMEA 8/14/2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

August 13, 2002
Ref: Amelio Carpet, Inc.
6323 S.W. 1st St.
Margate, Fla. 33068
Document # P00000002101

Division of Corporations
Reinstatement Section

Gentleman - The reference of this letter is to inform, that I did not paid my Annual report, due to I never received the renewal form probably this was sent to the acting office, and they are not together, he never inform me at respect and I went to obtain a license and I was informed that my Company is not active. I am sorry for this circumstance and I promise this will not happen again, since this is my first time in business, thanks for your help.

Sincerely,

