


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PG 1/92

APPLICATION REINSTATEMENT	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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SECRET
OFFICE OF THE SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 FEB 25 PM 9:01

DOCUMENT # **P00000011888**

1. Corporation Name

BUDGET TILES OF POMPANO, INC.

Principal Place of Business

1790 NORTH POWERLINE ROAD
POMPANO BEACH FL 33069

Mailing Address

1790 NORTH POWERLINE ROAD
POMPANO BEACH FL 33069

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

2. New Principal Office Address, If Applicable

1718 W. ATLANTIC BLV
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

1718 W. ATLANTIC BLV
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

02/03/2000

5. FEI Number

65-0979882

Applied For

Not Applicable

City & State

POMPANO BEACH FL

City & State

POMPANO BEACH FL

Zip

33069

Country

U.S.

Zip

33069

Country

U.S.

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
1	2	3	4
PSD	VENTO, STEFANO	1790 NORTH POWERLINE ROAD	POMPANO BEACH FL 33069
VTD	VENTO, PHILLIP	1790 NORTH POWERLINE ROAD	POMPANO BEACH FL 33069

8. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name

Stefano Vento

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

1790 N Powerline Road

Suite, Apt. #, Etc.

City

Pompano Beach

State

FL

Zip Code

33069

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

1-08-02

11. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-08-02

Daytime Phone #

CR2E040 (8/01)

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Budget Tiles of Pompano, Inc.
1790 N Powerline Road
Pompano Beach, FL 33069

December 17, 2001

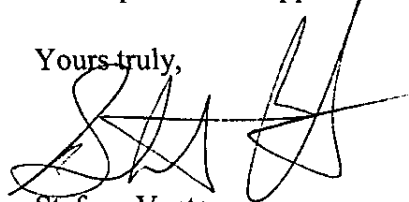
Florida Dept of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Document #P00000011888

We are enclosing the application for reinstatement along with a check for \$150.00 to cover the fees involved to get the above named corporation reinstated. We kindly ask that the reinstatement fee of \$600.00 be waived as the corporation was formed in 2000 and the 2001 report is the first year an annual report needed to be filed. We were not aware of this annual filing requirement. In the future the report will be timely filed.

Please process the application and reinstate the corporation.

Yours truly,



Stefano Vento