PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P00000039653
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1. Corporation Name

T & S POOL & TILE, INC.

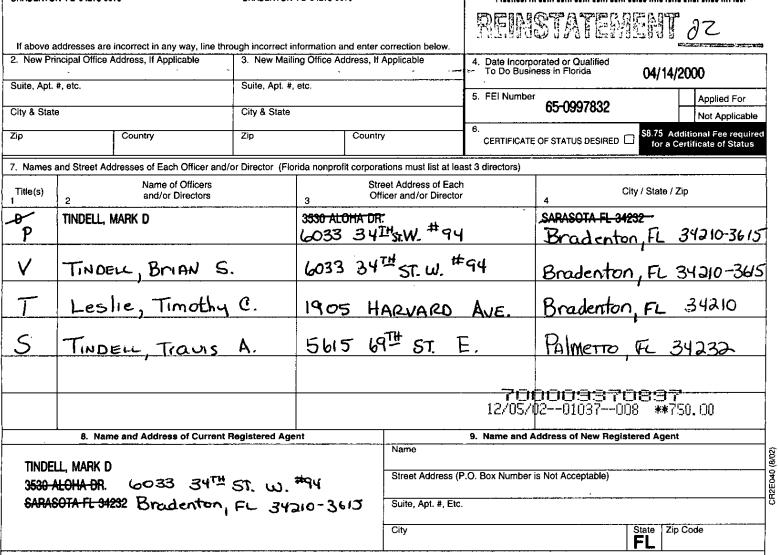
Principal Place of Business

Mailing Address

6033 34TH ST. W. #94 **BRADENTON FL 34210-3615** 6033 34TH ST. W. #94 **BRADENTON FL 34210-3615** FILED

02 DEC -5 PM 12: 31

SECRETARY OF STATE TALLAHANSEF, FLORIDA



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 filling 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.

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. or 617.0505, F.S.

Signature of Registered Agent

BTHTABERE QMARE W. Tindel 12/2/02 941-284-5553