

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV 19 PM 1:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000040871

1. Corporation Name

WELLINGTON GRANTIE & MARBLE, INC.

Principal Place of Business

2091 INDIAN ROAD
W. PALM BEACH FL 33409

Mailing Address

2091 INDIAN ROAD
W. PALM BEACH FL 33409

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/24/2000

5. FEI Number

65-0305279

Applied For

Not Applicable

6.

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	TROPEANO, FRANK	12055 REGAL COURT	W. PALM BEACH FL 33414
VD	TROPEANO, DEAN	2091 INDIAN RD.	W. PALM BEACH FL 33409
SD	SANCHEZ, PEDRO	12172 REGAL CT.	W. PALM BEACH FL 33414
TD	TROPEANO, MICHELLE	12055 REGAL CT.	W. PALM BEACH FL 33414
S	TROPEANO, RAFFAELE	344 WINTERS ST.	W. PALM BEACH FL 33405
300009078623 11/19/02--01028--006 **150.00			

8. Name and Address of Current Registered Agent

TROPEANO, FRANK
2091 INDIAN ROAD
W. PALM BEACH FL 33409

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

CR2ED40 (8/02)

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

Nov. 15-02

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nov. 15-02 561-686-5800

Date

Daytime Phone #

WELLINGTON GRANITE & MARBLE, INC.

2091 INDIAN RD.

WEST PALM BEACH, FL 33409

tel: 561-686-5800 fax: 561-686-9996

Date: 11-15-02

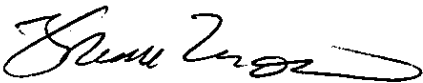
To: Florida Department of State

Re: Corporation Papers

To Whom it May Concern:

This is to inform you that we never received our two uniform business reports to keep our corporation in active status. We would really appreciate if you could waive the reinstatement fee. We apologize for any inconvenience.

Thank you,



Frank Tropeano
President