


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name Florida Furniture Marketing, Inc <i>000000062709</i>			
2. Principal Office Address 10295 St. Andrews Rd. Suite, Apt. #, etc.		3. Mailing Office Address Same Suite, Apt. #, etc.	
City & State Boynton Beach		City & State	
Zip 33436	Country USA	Zip	Country

FILED
03 MAY -8 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000018571500
05/08/03--01068--010 **450.00

4. Date Incorporated or Qualified To Do Business in Florida June 16 2000	
5. FEI Number 65-1021899	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent		
Name Jeff Horn		
Street Address (P.O. Box Number is Not Acceptable) 10295 St. Andrews Rd.		
Suite, Apt. #, Etc.		
City Boynton Beach	State FL	Zip Code 33436

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 <i>Jeffrey A. Horn</i> REGISTERED AGENT MUST SIGN	Date 5/5/2003

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
Pres.	Jeff Horn	10295 St. Andrews Rd.	Boynton Beach, FL 33436

01-03 487 ITS

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 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:	<i>Jeffrey A. Horn</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date 5/5/2003	Daytime Phone # 561 379-8770

CR2E081 (10/02)

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May 5, 2003

TO: Reinstatement Department

RE: Reinstatement of Florida Furniture Marketing, Inc.

Per our phone conversation on May 5, 2003, I am sending the attached corporation reinstatement information in order to reinstate the corporation listed.

As I changed addresses, information regarding the UBR requirements was never forwarded to my current address.

Please note that I have included the required fees for reinstatement of \$450 for the years 2001, 2002 and 2003.

Thank you for your prompt attention and help in this matter.

Sincerely,

Jeff Horn