## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPO					\$	DEPAR Secretary SION OF C	y of S		E		2009 OCT	FILED	
DOCUMENT # P00000113779  1. Corporation Name										SLORE HART DE STÂIE TALLAHASSEE, FLORIDA			
AL'S MARBLE & GRANITE CO.													
2. Principal Office Address - No P.O. Box # 13615 SOUTH DIXIE HWY					3. Mailing Office Address 13615 SOUTH DIXIE HWY					REINSCREEGRI (12/08) VIEWS			
Sulte, Apt. #, etc. 535					Suite, Apt. #, etc. 535					4. Date Incorporated or Qualified To Do Business in Florida 12/13/2000			
City & State MIAMI, FL					City & State MIAMI, FL				<b>5.</b> FEI Number				
<sup>Zip</sup> 33176		Country			<sup>Zip</sup> 33176		US	ntry					dditional Fee required Certificate of Status
7. Name and Address of Current Registered Agent											_		
Name HORACIO A. BARRERA										☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.			
Street Address (P.O. Box Number is Not Acceptable) 13615 SOUTH DIXIE HWY													
Suite, Apt. #, Etc. 535													
City MIAMI							State Zip Code						
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the old Signature of Registered Agent  REGISTERED AGENT MUST SIGN										bligations of section 607.0505 or 617.0503, F.S.  Date			
9. Names and	d Street Ad	dresses	of Eag	officer and	l/or Director (Fic	rida nonpro	ofit corpo	orations must lis	t at lea	ast 3 directors)	···		
Titles	Name of Officers and/or Directors					Street Address of Each Officer and/or Director					City / State / Zip		
Р Н	HORACIO A. BARRERA					13615 SOUTH DIXIE HWY				STE 535 MIAMI, FL 33176			
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										800161337488 			
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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 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 pald and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, 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:  10/01/2009 786-319-0176													
		SNATURE	AND	TED OF PRI	MED NAME OF	SIGNING OF	FICER O	R DIRECTOR		<del></del>	Date	Daytime I	

- AM-LOS OCT 5 2009

Miami, FL, October 1, 2009

Florida Department of State Division of Corporations Annual Report/Reinstatement Section PO Box 6327 Tallahassee, FL 32314

## Ref: AL'S MARBLE & GRANITE CO., Document No. P00000113779

Dear Sirs,

This is to inform you that the referenced corporation did not file its 2008 nor its 2009 Annual Reports because it did not receive the UBR Annual Report Notice for 2008 since it changed principal/mailing address. Since this company wants to remain active, we are sending the Reinstatement Form for this corporation along with the payment of \$300.00 corresponding to the Annual Report fees for the years previously mentioned for you to please reinstate it and please waive any late filing penalties due to the facts previously presented. We would really appreciate it.

Should you have further questions, please contact us at (786) 319-0176. We apologize for any inconvenience this may have caused. Thank you very much for your cooperation.

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HORACIO A. BARRERA

President