2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000020545

City-St-Zip:

COCOA, FL 32922

FILED Oct 23, 2009 Secretary of State

| Entity Nar | ne: BREVA | ARD TILE AND MARBLE INC. | | | |
|---------------------------------------------|---------------------------------------------|------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------|--|
| Current P | rincipal Pla | ce of Business: | New Principal Place o | New Principal Place of Business: | |
| 6195 COR COCOA, F | SICA BLVD. L 32927 | US | | | |
| Current M | ailing Addı | ress: | New Mailing Address | New Mailing Address: | |
| 6195 CORSICA BLVD. COCOA, FL 32927 US | | | 1800 WEST 49 ST SUITE 223 HIALEAH, FL 33012 | US | |
| FEI Number: | 59-3700190 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | Address o | f Current Registered Agent: | Name and Address of | Name and Address of New Registered Agent: | |
| COCOA, F | ISICO BLVE L 32997 | US | purpose of changing its registered | l office or registered agent, or both, | |
| | RE: JUAN (| C BLANCO | | | |
| Electronic Signature of Registered Agent | | | ent | Date | |
| | | 193(2)(b), F.S., the corporation did ning Trust Fund Contribution (). | ot receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PD BLANCO, JU 6195 CORSI COCOA, FL | CA BLVD. | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VPD ARAMBULA, 610 LINDSA COCOA, FL | Y AVE. | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | SD PORRAS, EI 1679 FORTU | | Title: Name: Address: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JUAN C BLANCO PD 10/23/2009