

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 JAN -6 AM 8:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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01/08/04--01007--023 \*\*150.00

DOCUMENT # P01000030689

**1. Corporation Name**

KANE Flooring, Inc.  
7321 Brookhaven Terrace  
ENGLEWOOD, FL 34223

**2. Principal Office Address**

7321 Brookhaven Terr

Suite, Apt. #, etc.

**City & State**

ENGLEWOOD, FL

**Zip**

34223

**Country**

**3. Mailing Office Address**

7321 Brookhaven Terr.

Suite, Apt. #, etc.

**City & State**

ENGLEWOOD, FL

**Zip**

34223

**Country**

**REINSTATEMENT 03**

**4. Date Incorporated or Qualified  
To Do Business in Florida**

3/2/04

**5. FEI Number**

65-1085905

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☐**

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

**Name**

STEVEN MURATORE

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

7321 Brookhaven Terrace

Suite, Apt. #, Etc.

**City**

ENGLEWOOD

State  
FL

Zip Code  
34223

**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

*Steven Muratore*

REGISTERED AGENT MUST SIGN

Date 12-8-03

**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
D	STEVEN MURATORE	7321 Brookhaven Terrace	ENGLEWOOD FL 34223
P	STEVEN MURATORE	7321 Brookhaven Terr.	ENGLEWOOD FL 34223
T	STEVEN MURATORE	7321 Brookhaven Terr.	ENGLEWOOD FL 34223
S	STEVEN MURATORE	7321 Brookhaven Terr.	ENGLEWOOD FL 34223

**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:

*Steven Muratore*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-8-03 941-460-1545

Date

Daytime Phone #

CR2E081 (10/02)

**KANE FLOORING, INC.**  
**7321 Brookhaven Terrace**  
**Englewood, Fl. 34223**  
**941-460-1545**

Florida Department of Revenue  
Division of Corporations  
P. O. Box 1300  
Tallahassee, Fl. 32302

November 25, 2003

Re: Corporation Reinstatement KANE FLOORING, Inc. EIN: 65-1085905

After finding out my company has been dissolved for failure to file an annual report I contacted the firm that did my incorporation and they informed me that the annual Report would have been sent to my old address. I never received that annual report form.

We never received notification that an annual report was due.

Enclosed is a completed corporation reinstatement form along with a check for 150.00 for the annual filing for 2002 and 150.00 for the annual filing for 2003.

Please reinstate our corporation and forward to our address correspondence that shows this has been addressed.

Your help in this matter is greatly appreciated and if any additional information is needed, please contact me.

Sincerely,

  
Steven Muratore