

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PS 10F2

APPLICATION

FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

03 JAN 13 PM 12:03

SECRETARY OF STATE
TALLAHASSEE FLORIDA

700008943637

11/12/02--01131--007 **8.75



DOCUMENT # P01000052766

1. Corporation Name

MARBLE & TILE INSTALLATION ONLY, INC.

Principal Place of Business

Mailing Address

5740 GRAND CANYON DR
ORLANDO FL 32810

5740 GRAND CANYON DR
ORLANDO FL 32810

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

2. New Principal Office Address, If Applicable

2615 CEDARIDGE

Suite, Apt. #, etc.

CIRCLE

City & State

CLERMONT FL

Zip

34711

Country

LAKE

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/29/2001

5. FEI Number

59-3735578

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
DP	BURGOS, JUAN M	5740 GRAND CANYON DR- 2615 CEDARIDGE CIRCLE	ORLANDO FL 32810- CLERMONT FL, 34711
VP	GONZALO CASTRO ZAPATA	2012 CABO SAN LUCAS DR #307.	ORLANDO FL -32839
SEC.	DIANNE BURGOS	2615 CEDARIDGE CIRCLE	CLERMONT FL, 34711
TRE.	MAXIMO FIDEL MORALES	2466 ELMORE CT.	APOPKA FL, 32703
			700008943637 11/12/02--01131--006 **150.00

8. Name and Address of Current Registered Agent

BURGOS, JUAN M

1051 46 LEE RD

ORLANDO FL 32822

2615 CEDARIDGE

CIRCLE

CLERMONT FL, 34711

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

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] **SIGNATURE REQUIRED**
REGISTERED AGENT MUST SIGN

Date

10/28/02

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] **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/28/02

(321) 377-2163

Date

Daytime Phone #

002E040 (802)

Marble & Tile Installations Only Inc.

2615 Cedaridge circle
Clermont Fl, 34711
Business 321-377-2163
Fax 407-877-4067

www.marbleandtileInstallations.com

October 28, 2002

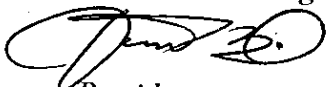
To Whom It May Concern,

Please be advised that our corporation, Marble & Tile Installations Only Inc.

Did not receive the Two prior (UBR) notices or any other correspondence from your department. Please note the Certificate of Administrative Dissolution or Revocation was due to take effect on 10/04/02, However we received the document on 10/25/02, providing no time to act. We kindly ask that due to the above reasons our corporation would be changed to active status and submit the proper filling fees for such. Please note our address has changed and the updated address is listed in the application.

We kindly thank you,

Juan Marcos Burgos


President