## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORA REINSTATE			DEPARTMEN Secretary of Si	ate		FILED SECRETARY OF STATE ISION OF CORPORATION OF CO		
DOCUMENT # PD1 0000 59393								
Precision Floor Covering , Inc.								
					200024604652 11/12/0301014030 ***8.75			
2. Principal Office Address 3. 8520 Gulf Blvd #34 8			3. Mailing Office Address 8520 Gulf Blvd.			REASTATEMENT 63		
Suite, Apt. #, etc. # 34		1	Suite, Apt. #, etc. サスレ			4. Date Incorporated or Qualified		
City & State		City & State	City & State Navame			To Do Business in Florida  June 13, 2001  5. FEI Number  Applied For		
Navarr	e Florida Country	2 FLOS	ida Count			137236	Not Applicable	
32566	usa	325	66 US	A	CERTIFICATE	OF STATUS DESIRED A 60	5 Additional Fee required r a Certificate of Status	
7. Name and Address of Current Registered Agent  Name  Veronica Lynn Houston  Street Address (P.O. Box Number is Not Acceptable)  8520 Gulf Blvd #34  Suite, Apt. #, Etc. # 34  City  Navarre  State Zip Code  FL 32 566								
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 Agen Agen Agen Agen Agen Agent MUST SIGN  Date Nov. 6, 3003								
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			reet Address of Each fficer and/or Director		City / State	e / Zip	
VP GO	Garth Houston			ulf Blvd:	±34	Navarre FL 3256		
P Ve	P Veronica Lynn Haiston 8500 GUHBIVA#34 Navarre & 3296							
							1/5	
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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 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:    Nov 6 203 850 939-72-39   SIGNATURE and TYPED OR PRINTIED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #								

## Precision Floor Covering, Inc.

## The Highest Standard in Commercial Installation

November 5, 2003

Re: Doc. # P01000059393

FEI # 59-3737236

To Whom It May Concern:

I respectfully request to have the \$600.00 reinstatement fee waived for the following reason: The corporation, registered agent, or officer of company did not receive prior UBR notification for 2003.

Thank you for your consideration in this matter.

Ternica Lyn Howton

Sincerely,

Veronica Lynn Houston

President

8520 Gulf Blvd. #34 Navarre, FL 32566 (850)939-7229