

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 29 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 02-03

DOCUMENT # P01000077268

1. Corporation Name **SMART CHOICE Interiors, Inc.**
by JONATHAN K. HURSH.

2. Principal Office Address

1750 AIA SOUTH

Suite, Apt. #, etc.

SUITE A

City & State

ST. AUGUSTINE, FL.

Zip

32080

Country

U.S.A.

3. Mailing Office Address

1750 AIA SOUTH.

Suite, Apt. #, etc.

SUITE A

City & State

ST. AUGUSTINE

Zip

32080

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

4-15-2001

5. FEI Number

59.3735681

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

JONATHAN K. HURSH.

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

5024 Shore Dr.

Suite, Apt. #, Etc.

ST. AUGUSTINE, FL.

City

ST. AUGUSTINE

State

FL

Zip Code

32086

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

Jonathan K. Hursh
REGISTERED AGENT MUST SIGN

Date

10/27/2003

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
P	JONATHAN K. HURSH.	5024 Shore Dr.	ST. AUGUSTINE 32086
V	JENNIFER L. HURSH.	5024 Shore Dr.	ST. AUGUSTINE 32086

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:

Jonathan K. Hursh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/27/2003

Daytime Phone #

**(352)
745-1555**

CR2001 (10/02)

7/11/3

To: WHOM IT MAY CONCERN.

(Smart Choice Interiors, Inc.)
by JONATHAN K. HURSH

did NOT RECEIVE IT'S (UBR)
Reports FOR 2002 & 2003

Thank You!

Jonathan K. Hursh