PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.							
AF	PPLICATION FOR	Jim Sr	DA DEPARTMENT OF STATE Jim Smith of State		FILED		
REIN	NSTATEMENT (/ 1/16 6	ISIN OF CORPORATIONS		02 OCT 30 AMII: 43		
DOCUMENT # P0100078626 1. Corporation Name				SECRETARY OF STATE TALLAHASSEE FLORIDA			
MARLIN FLOORING, INC.							
Principal I	Place of Business	Mailing Address		_			
1906 N. 4 HOLLYWO	OTH AVE. OD FL 33021	1908 N. 40TH AVE. HOLLYWOOD FL 33021					
If above addresses are incorrect in any way, line through incorrect information and enter correction below.							
New Principal Office Address, If Applicable Suite, Apt. #, etc.		New Mailing Office Address, If Applicable Suite, Apt. #, etc.		Date Incorporated or Qualified To Do Business in Florida 08/10/2001			
City & State		City & State		,5. FEI Number Applied For Not Applicable			
Zip Country		Zip Country		CERTIFICATE OF STATUS DESIRED S8.75 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							
Title(s)	Name of Officers and/or Directors	0.1001.1001000			City / State /	Zip	
VD WESTERMAN, KEITH		1908 N. 40T	1908 N. 40TH AVE.		HOLLYWOOD FL 33021		
STD WHITE, SNOW		1908 N. 40T	1908 N. 40TH AVE.		HOLLYWOOD FL 33021		
PD	PD WESTERMAN, FRANK		1908 N. 40TH AVE.		HOLLYWOOD FL 33021		
				, <u>.</u>			
			r - ru - cu	- 7		.,,,,	
				9. Name and A	Address of New Registered Agen	ıt	
	erman, keith N. 40th ave.		Name Street Address (P.O. Box Number is Not Acceptable)				
HOLLYWOOD FL 33021			Suite, Apt. #, Etc.	Suite, Apt. #, Etc.			
		City	FL				
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 o Registered	Agent KuBUGDERE	Cher Req	UIRED		Date 0433	0.2	
		GISTERED AGENT MUST SIGN					

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

123,02 30

3057512716

Daytime Phone

MARLIN FLOORING, INC 1908 N 40TH AVENUE HOLLYWOOD, FLORIDA 33021

FACSIMILE TRANSMITTAL

DATE:

October 25, 2002

TO:

FLORIDA DEPT OF STATE

ATTN:

REINSTATEMENT DIVISION

FROM:

Snow

NUMBER OF PAGES INCLUDING COVER:

PLEASE CONFIRM RECEIPT 4

MESSAGE:

I AM BAFFLED AS TO WHY MARLIN FLOORING WAS DISSOLVED. I FILLED OUT ALL THE PROPER PAPERWORK AND PAID THE CORRECT AMOUNT OF MONEY AND SENT IT IN JULY. I THEN RECEIVED THE 2002 UBR THAT HAD ALL THE CORRECT INFORMATION BUT I FAILED TO SIGN AND RETURN BECAUSE I WAS UNDER THE IMPRESSION RENEWAL WAS IN MAY 2003 NOT SEPTEMBER 2002. CAN YOU PLEASE TAKE INTO CONSIDERATION ALLOWING MARLIN FLOORING TO BE REINSTATED BY ACCEPTING THE SIGNED FORM WITHOUT PENALTY?

SNOW WHITE SECRETARY/TREASURER MARLIN FLOORING