PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 OCT 16 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000033488**

1. Corporation Name

DISTINCT DESIGN INC.

Principal Place of Business	Mailing Address
1575 AVIATION CENTER PKWY. #516 DAYTONA BEACH FL 32114	1575 AVIATION CENTER PKWY. #516 DAYTONA BEACH FL 32114

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

REINSTATEMENT 03

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 03/27/2002

5. FEI Number: 010683073 ☐ 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	ARROYO, EDUARDO O	708 SW RAVENS WOOD LA.	PORT ST. LUCIE FL 34983
V	ARROYO, VIRGINIA M	708 SW RAVENS WOOD LA	PORT ST LUCIE FL 34983

500023836565
10/16/03--01013--004 **150.00

8. Name and Address of Current Registered Agent

ARROYO, EDUARDO O
708 SW RAVENS WOOD LA.
PORT ST. LUCIE FL 34983

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

CR2E040 (7/03)

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 Eduardo O. Arroyo Eduardo O. Arroyo Date 10-13-03

REGISTERED 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 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: Virginia Arroyo VIRGINIA ARROYO 10-13-03 386-947-3369

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2052

Independently Owned and Operated

FOUR SEASONS SUNROOMS

Sunrooms · Conservatories · Patio Rooms
Patio And Deck Enclosures · Skylights
Outdoor Living...Indoors

1575 Aviation Center Pkwy 516 Daytona Beach, FL 32114

October 13, 2003

To whom it may concern:

We have just received a notice stating that our corporation is being revoked due to non renewal. It also states that we have been sent two prior uniform business report notices. We NEVER received any UBR notices. We are sending a completed application for reinstatement along with a check for $150.00. Please reinstate the corporation as soon as possilbe. If there are any questions, please call (386) 947-3369.

Thank you very much,

Eduardo Arroyo

Eduardo Arroyo
President