

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1052

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

1575 AVIATION CENTER PKWY.
#516
DAYTONA BEACH FL 32114

Mailing Address

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.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
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

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
REGISTERED AGENT MUST SIGN

Date 10-13-03

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

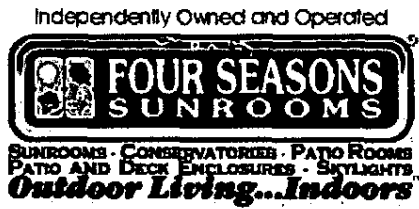
Date

Daytime Phone #

10-13-03 386-947-3369

CR2E040 (7/03)

2092



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 possible. If there are any questions, please call (386) 947-3369.

Thank you very much,

Eduardo Arroyo
President