


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUL -1 PM 3:22

REINSTATEMENT 03-04

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P02000050826			
1. Corporation Name EUROPEAN CLASSIC TILE & MARBLE DESIGN, INC.			
2. Principal Office Address 15800 BROTHER COURT		3. Mailing Office Address	
Subs. Apt. #, etc.		Subs. Apt. #, etc.	
City & State FT MYERS, FL		City & State	
Zip 33912	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida 05-08-02	
5. FEI Number 01-0728489	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	

7. Name and Address of Current Registered Agent	
Name VICTORIA TIMIS	100039015911
Street Address (P.O. Box Number is Not Acceptable) 1101 N.E 4 CT	07/12/04--01045--003 **15.00
Subs. Apt. #, Etc.	100039015911
	07/12/04--01045--004 **15.00
City HOLLANDALE,	State FL
	Zip Code 33009

8. I, being appointed the registered agent of the above named corporation, am familiar with and except the obligations of section 607.0605 or 617.0503, F.S.

Signature of Registered Agent: Victoria Timis Date: 29/06/04

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PSTD	VICTORIA TIMIS	1101 n.e.4 CT	HOLLANDALE, FL33009

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)(b), 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: Victoria Timis Date: 29/07/04

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR Date Day/Mo/Yr

CR2508110002

EUROPEAN CLASSIC TILE & MARBLE DESIGN, INC.
15800 BROTHERS CT
FT MYERS, FL 33912

SECRETARY OF STATE
DIVISION OF CORPORATION
REINSTATEMENT SECTION
409 EAST GAINES ST
TALLAHASSEE, FL. 32314

TO WHOM IT MAY CONCERN:
I VICTORIA TIMIS AM SUBMITTING THIS LETTER TO INFORM YOU
THAT THE REASON FOR ME NOT HAVING SENT THE ANNUAL REPORT
IS BECAUSE I DID NOT RECEIVE THE FORM 2003.

ATTACHED YOU WILL FIND A MONEY ORDER IN THE AMOUNT OF 300.00 DOLLAR
PLEASE ACCEPT THIS FEE.
DOCUMENT# P02000050826

SINCELY YOURS

VICTORIA TIMIS

Victoria Timis