


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>P02000092982</u>			
1. Corporation Name <u>MARBLE MECHANICS INC.</u>			
2. Principal Office Address <u>5516 29TH STREET WEST</u> Suite, Apt. #, etc.		3. Mailing Office Address <u>5516 29TH STREET WEST</u> Suite, Apt. #, etc.	
City & State <u>BRADENTON, FL</u> Zip <u>34207</u> Country <u>U.S.</u>		City & State <u>BRADENTON, FL</u> Zip <u>34207</u> Country <u>U.S.</u>	

FILED
03 DEC 31 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

4. Date Incorporated or Qualified To Do Business in Florida <u>8/27/02</u>	
5. FEI Number <u>13-4226976</u>	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent		
Name <u>DEANA SECHLER</u>		
Street Address (P.O. Box Number is Not Acceptable) <u>5516 29TH STREET WEST</u>		
Suite, Apt. #, Etc. <u>300026214123</u>		
City <u>BRADENTON</u> State <u>FL</u> Zip Code <u>34207</u>		

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 Diana R. Sechler Date 12-31-03
REGISTERED AGENT MUST SIGN

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/D	THOMAS E. SECHLER	5516 29TH STREET WEST BRADENTON	BRADENTON, FL 34207
TS/D	DEANA SECHLER	5516 29TH STREET WEST	BRADENTON, FL 34207
VP	Asa Cuellar	1711 Woodmaker CT	Brandon, FL 34510

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS E. SECHLER
PRESIDENT

Date 12/31/03 (941) 232-4639

Daytime Phone #

CR2E081 (10/02)

TR

MARBLE MECHANICS, INC.
5516 29th STREET WEST
BRADENTON, FL 34207

December 31, 2003

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Marble Mechanics, Inc. Document # P02000092982

To Whom It May Concern:

We have just been informed that our corporation was administratively dissolved on September 19, 2003.

We have no record of having received the Uniform Business Report in 2003. Marble Mechanics Inc. began doing business in 2002 and, since that time, has also changed its mailing address from 7032 Persimmon Place Sarasota Fl to 5516 29TH Street West Bradenton, FL 34207.

We are, therefore, respectfully requesting abatement of the \$600 penalty for failing to file on time. Enclosed is the completed Corporation Reinstatement form along with a payment of \$150.00 for the annual fee.

Thank you for your consideration.

Sincerely,



Thomas Sechler
President