

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION**  
**FLORIDA DEPARTMENT OF STATE**  
Secretary of State  
DIVISION OF CORPORATIONS



FILED  
03 MAY 12 AM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000109015

1. Corporation Name

Marble & Tile Installation & Polishing, Inc.

2. Principal Office Address

180 W Royal Palm Road

Suite, Apt. #, etc.

Apt. 224

3. Mailing Office Address

SAHE

Suite, Apt. #, etc.

City & State

Hiawah Gardens, FL

City & State

Zip

33016

Country

U.S.

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Roberto Gonzalez

Street Address (P.O. Box Number is Not Acceptable)

180 W Royal Palm Road

Suite, Apt. #, Etc.

224

City

Hiawah Gardens

State

FL

Zip Code

33016

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

R Gonzalez

REGISTERED AGENT MUST SIGN

Date

04/30/2003

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
<u>P</u>	<u>Roberto Gonzalez</u>	<u>180 W Royal Palm Road #224</u>	<u>Hiawah Gardens, FL 33016</u>

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:

R Gonzalez President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

04/30/2003

Daytime Phone #

(850) 512-1040

CR2E081 (10/02)