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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETION

FILED

05 JAN -4 AM 4:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE
		Jim Smith Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P03000019441**
1. Corporation Name
Violeta Marble & Tile Company, Inc

2. Principal Office Address 821 SW 6 Street	3. Mailing Office Address 821 SW 6 Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Homestead, FL	City & State Homestead, FL
Zip 33030	Country USA
Zip 33030	Country USA

REINSTATEMENT 04

MRS

4. Date Incorporated or Qualified To Do Business in Florida 02-18-03	5. FEI Number 03-0512296	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>			

7. Name and Address of Current Registered Agent		
Name Kinder Frank Violeta		
Street Address (P.O. Box Number is Not Acceptable) 821 SW 6 street		
Suite, Apt. #, Etc.		
City Homestead	State FL	Zip Code 33030

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 **Kinder F. Violeta** Date **12/29/04**
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Kinder Frank Violeta	821 SW 6 street	Homestead, FL 33030

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01/04/05--01043--024 **150.00

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: **Kinder F. Violeta** Date **12/29/04** Daytime Phone # **786-2906588**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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VIOLETA MARBLE & TILE COMPANY, INC

**821 SW 6 Street
Homestead, FL 33030
Phone (786)290.6588**

December 29, 2004

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Re: Violeta Marble & Tile Company, Inc
P03000019441
Tax ID 03-0512296**

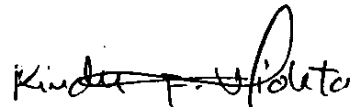
To Whom It May Concern,

As per my telephone conversation with you, please accept this letter as a request to stop any penalty to my corporation. I have not received notification by mail about the correction letters you sent me on July 28, 2004 in order to active my corporation. Notice that I sent a check in June 17, 04 to pay the annuity of my corporation corresponding to the year 2004 and I am sending \$ 150.00 money order for the year 2005.

Please change the corporation address to: **821 SW 6 Street, Homestead, Florida, 33030.**

Thank you in advance for your time and consideration and feel free to contact me if you have any questions at the telephone number above.

Sincerely,


Kinder Frank Violeta
President