

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JUN 29 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000090935

1. Corporation Name

Burns Tile Setters, Inc.

2. Principal Office Address - No P.O. Box #

1300 N. River Rd.

Suite, Apt. #, etc.

#E14A

City & State

Venice, FL

Zip

34293

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 05-07
CR2081 (1/07)

**4. Date Incorporated or Qualified
To Do Business in Florida**

8-19-03

5. FEI Number

55-0844531

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

John Burns, Jr.

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

1300 N River Rd. #E14A

Suite, Apt. #, Etc.

City

Venice

State

FL

Zip Code

34293

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

John P Burns Jr

REGISTERED AGENT MUST SIGN

Date 6-29-07

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
D	John P. Burns Jr.	1300 N. River Rd. #E14A	Venice, FL 34293

900105623139
07/06/07--01020--010 **450.00

6/29

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 contained in Chapter 119, 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:

John P Burns Jr

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-29-07

Date

9412707493

Daytime Phone #