

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000157193

1. Entity Name
FLOOR DECOR & MORE, INC.



FILED

05 JAN 28 PM 2:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



11032004 REIN-P CR2E098 (6/04)

4. FEI Number
20-0530876

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

ALEJO, FERNANDO
4960 CYPRESS TRACE DRIVE
TAMPA, FL 33624

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$750.00
After January 1, 2005, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME ALEJO, FERNANDO
STREET ADDRESS 4960 CYPRESS TRACE DRIVE
CITY-ST-ZIP TAMPA, FL 33624

TITLE **D** ☒ Delete
NAME KALOLO, OLISENE
STREET ADDRESS 4960 CYPRESS TRACE DRIVE
CITY-ST-ZIP TAMPA, FL 33624

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
800043740728
12/30/04--01032--004 *150.00**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **FERNANDO Alejo (PRESIDENT)**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/25/04 (813) 267-3416

Date Daytime Phone #

2/1/05

2/2

Floor Décor And More
4960 Cypress Trace Drive
Tampa, FL 33624

December 27, 2004

To Whom It May Concern:

Please find enclosed the renewal fee for my company's corporation with the State of Florida in the amount of \$150. I have been charged with a late fee of \$750 for failure to renew my company's corporation on time, however, I did not received any notification of my expired term. Per the suggestion of the customer service personnel, I am enclosing this letter to provide an explanation for not being able to renew on time.

I can be reached at 813-267-3416 if you have any questions or need additional information.

Thank you in advance for your attention in this matter.

Sincerely,


Fernando Alejo