

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000001426

Entity Name: FENIC MARBLE & TILE, INC.

FILED  
Oct 17, 2005  
Secretary of State

## Current Principal Place of Business:

691 ASHFORD OAKS DR APT 101  
ALTAMONTE SPRINGS, FL 32714

## New Principal Place of Business:

## Current Mailing Address:

691 ASHFORD OAKS DR APT 101  
ALTAMONTE SPRINGS, FL 32714

## New Mailing Address:

FEI Number: 58-2679471

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DE OCA, DARCIS M  
440 E HIGHLAND ST  
ALTAMONTE SPRINGS, FL 32701 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: DARCIS M. DE OCA

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CASTRO, FERNANDO  
Address: 691 ASHFORD OAKS DR APT 101  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D ( ) Delete  
Name: COSTILLA, NICOLAS  
Address: 4550 OAK CREEK ST APT 214  
City-St-Zip: ORLANDO, FL 32835

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: CASTRO, FERNANDO  
Address: 691 ASHFORD OAKS DR APT 101  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DS (X) Change ( ) Addition  
Name: COSTILLA, NICOLAS  
Address: 4550 OAK CREEK ST APT 214  
City-St-Zip: ORLANDO, FL 32835

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FERNANDO CASTRO

DPT

10/17/2005

Electronic Signature of Signing Officer or Director

Date