

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 NOV 30 PM 4:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000003507

1. Corporation Name

F.A.B.I. FLOORING, INC.

2. Principal Office Address

4407 Leto Lakes Blvd

3. Mailing Office Address

Suite, Apt. #, etc.

Apt 305

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Zip

33614

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/27/2003

5. FEI Number

20-5954814

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name

Mark C. Serra

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

600 Bypass Drive

Suite, Apt. #, Etc.

Ste 109

City

Clearwater, FL

State
FL

Zip Code
33764

REINSTATEMENT 04-06
[Signature]

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

[Signature of Mark C. Serra]

Date 11/24/2006

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
P	Elson J. Neves	4407 Leto Lakes Blvd, Apt 305	Tampa, FL 33614

300092368923
12/07/06--01051--008 **450.00

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 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:

[Signature of Elson J. Neves]

Elson J. Neves

11/24/2006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/2

F.A.B.I. FLOORING, INC.

4407 LETO LAKES BLVD, APT 305, TAMPA, FL 33614 • TEL 727-724-0180 FAX: 727-787-8861

November 24, 2006

Reinstatement Section
Division of Corporations
Secretary of State, State of Florida
2661 Executive Center Circle, Clifton Building
Tallahassee, FL 32301

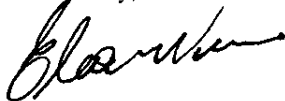
Re: Reinstatement of "F.A.B.I. Flooring, Inc." Doc #P04000003507

Dear Sirs:

Please reinstate the above company to active status as soon as possible. We have not received the 2004-notice of report due or notice of intent to dissolve the corporate status. Therefore, through our Registered Agent, Mark Serra, we are respectfully requesting that the penalty/fine of \$600 be waived and request that you find our check in the amount of \$450 to reinstate the above company.

Thank you in advance for your immediate attention to this matter. If there are any problems or questions regarding this, please contact our Registered Agent, Mark Serra at 727-724-0180.

Sincerely,



Elson J. Neves
President

Encl: Check #1059