

APPROVED
AND
FILED

192

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

06 MAR 27 PM 2:36

**CORPORATION
REINSTATEMENT**



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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000161732.

1. Corporation Name

EL VIELO TILE REMODELING, CORP

2. Principal Office Address

8105 SW 147 CT

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Zip

Country

Zip

Country

REINSTATEMENT

05-06 PSC

4. Date Incorporated or Qualified
To Do Business in Florida

11/30/04.

5. FEI Number

65-1237059

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name

Humberto Daniel

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

8105 SW 147 CT

Suite, Apt. #, Etc.

City

Miami

State
FL

Zip Code

33193

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]
REGISTERED AGENT MUST SIGN

Date

3/2/06.

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	Humberto Daniel	8105 SW 147 CT	Miami, FL 33193

200069973482
04/10/06-01087-000 **300.00

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)(f), 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/2/06

Daytime Phone #

292

EL VELO TILE REMODELING, CORP.
8501 SW 147 COURT
MIAMI, FL 33193
786.586.4333

March 21, 2006

Florida Department of State
Division of Corporations

Re: **EL VELO TILE REMODELING, CORP.**
P04000161132

To Whom It May Concern,

As per my telephone conversation with your office, with this letter I am asking
that the penalty please be waived for the corporation. We did not receive notification in ²⁰⁰⁵
²⁰⁰⁶ the mail, so thank you in advance for your time and consideration.

Sincerely,

Humberto Daniel
President

