Feb 04 08 06:44p p.1

FILED
08 JAN 24 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000075838

1. Entity Name
BUILDERS CARPET & TILE, INC.

W08—4968

900115996459
01/24/08 01029 023 $ 300.00

REINSTATEMENT 06-08

Principal Place of Business	Mailing Address
1509 SAN MARCO DR. # 108 ORMOND BEACH, FL 32174	1509 SAN MARCO DR. # 108 ORMOND BEACH, FL 32174

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
518 Ballough rd	518 Ballough rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Daytona Beach, Fl	City & State: Daytona Beach, Fl
Zip: 32174 Country: USA	Zip: 32174 Country: "

4. FEI Number ☐ Applied For ☑ Not Applicable

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

6. Name and Address of Current Registered Agent

MCALISTER, PAUL
1509 SAN MARCO DR
108
ORMOND BEACH, FL 32174

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable): 518 Ballough Rd

City: Daytona Beach FL Zip Code: 32174

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: Paul [signature] 1/23/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $300.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MCALISTER, PAUL → STAPL 1509 SAN MARCO DR. #108 518 Ballough Rd. ORMOND BEACH, FL 32174 Daytona Bch, Fl. 32174	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 900115996459 01/24/08--01029--024 **150.75
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Paul [signature] 1/23/08 386-[illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Rejected in Error!!

JC 2/4