

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P05000079430

1. Corporation Name

M & G TILE & MARBLE INSTALLATION, CORP

2. Principal Office Address - No P.O. Box #
560 SW 6 Court

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pompano-Beach, FL

City & State

Zip
33060

Country
US

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/01/2005

5. FEI Number
20-2935376

☐ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
MARCOS ANTONIO DAMACENA

Street Address (P.O. Box Number is Not Acceptable)
560 SW 6 Court

Suite, Apt. #, Etc.

City
Pompano Beach

State
FL

Zip Code
33060

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

Date 10/17/07

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	MARCOS ANTONIO DAMACENA	560 SW 6 Court	Pompano Beach/FL/33060

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/17/07

Date

Daytime Phone #

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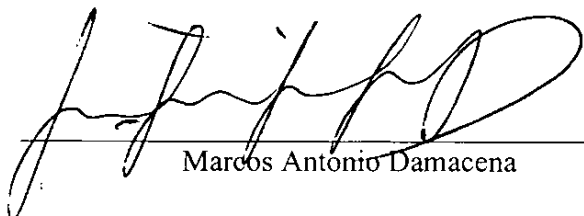
September 27th, 2007

RE: M & G TILE & MARBLE INSTALLATION, CORP.
P05000079430

DEAR STATE DEPARTMENT,

PLEASE WAIVE MY LATE FEE BECAUSE, I DID NOT RECEIVE THE ANNUAL
REPORT PAPER FROM THE YEARS 2006 AND 2007 IN MY HOUSE. I DIDN'T
KNOW ABOUT THIS ANNUAL REPORT. I PROMISE YOU THAT NEXT YEAR, I
WILL BE ONE OF THE FIRST PEOPLE TO FILE THE ANNUAL REPORT.
MY NEW MAILING ADDRESS: 560 SW 6 Court, POMPANO BEACH, FL 33060

SINCERELY,



Marcos Antonio Damacena

