

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

paye/wk

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P93000026144

1. Corporation Name

Imperial Floor Services, Inc

2. Principal Office Address

38549 US 19 N

3. Mailing Office Address

38549 US 19 N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Palm Harbor, Fl

City & State

Palm Harbor, Fl

Zip

34684

Country

USA

Zip

34684

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

3-30-1993

5. EEL Number

59-3173529

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

FILED
06 MAY 12 AM 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600075548056
05/31/06--01010--022 **750.00
CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name

Robert T. Goetz

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

38549 US 19 N

Suite, Apt. #, Etc.

City

Palm Harbor

State

FL

Zip Code

34684

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

4/17/06

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
Pres	Robert Goetz	4052 Capital Dr.	Palm Harbor Fla 34685

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/17/06

Daytime Phone #

727 943 9066

April 12, 2006



To who it may concern:

We are filing a corporation reinstatement. The address you have had on file for our company was incorrect. We recently moved, and it was brought to our attention that our corporation was dissolved. Our last location had multiple addresses (we moved stores within the same shopping center) It was originally 36613 US 19 N, then we moved to 36645 US 19 N, and we are now located at 38549 US 19 N, Palm Harbor FL, 34684.

We have spoken to one of your representatives, @ 850-245-6059, she told us to write a letter explaining the error, and to send a check for \$750, and the additional charges would be waived. Enclosed is the check for \$750.

If there is anything further we need to do to correct this issue, please let us know.

(727)943-9066 phone

(727)945-1210 fax

Imperial Floor Services, Inc.
Rob Goetz, Owner

