PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUL 23 PM 12:10

DOCUMENT # P93000068331

1. Corporation Name DECORATIVE CONCRETE DESIGNS OF CENTRAL FLORIDA INC.

100002950591--3
-08/04/99--01074--025
***1058.75 ***1058.75

REINSTATEMENT 97-99

Principal Place of Business	Mailing Address
1163 19TH ST - SUITE A VERO BEACH, FL 32960	

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 1993

5. FEI Number: 59-3217647 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PRES.	JOHN M. MALEK	2190 47TH TERRACE	VERO BEACH, FL 32966
V. PRES	JOSEPH L. FRANCIS	862 LANCE ST.	SEBASTIAN, FL 32958
TREAS.	CHRISTINE A. FRANCIS	862 LANCE ST.	SEBASTIAN, FL32958
SEC.	BARBARA A. MALEK	4840 47TH COURT	VERO BEACH, FL32967

8. Name and Address of Current Registered Agent

JOHN M. MALEK
2190 47TH TERRACE
VERO BEACH, FL 32966

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc
City | State FL | Zip Code

CR2E081 (12/98)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: John Malek — REGISTERED AGENT MUST SIGN — Date 7-19-99

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. 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)(i), 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: Barbara A. Malek — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BARBARA A. MALEK

7-19-99 — Date

561-567-8894 — Daytime Phone #