

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

02 FEB 25 PM 1:06

DOCUMENT # P95000068905

1. Corporation Name

Aries Marbles & Tiles Corp

2. Principal Office Address

11320 SW 46 ST

Suite, Apt. #, etc.

3. Mailing Office Address

11320 SW 46 ST

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL

Zip

33165

Country

USA

Zip

33165

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

Sep 7/1995

5. FEI Number

593960786

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

Joelvis A. Peña

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

11320 SW 46 ST

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33165

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

Joelvis A. Peña

Date

02/07/2002

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	Joelvis A. Peña	11320 SW 46 ST	Miami FL 33165

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)(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:

Joelvis A. Peña

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/07/02

Date

(305) 221-7806

Daytime Phone #

cell (305) 277-5844

202

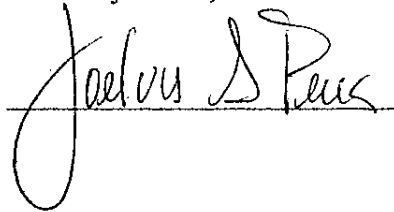
Miami Fl, February 07/ 2002

To Whom It May Concern:

~~This one is to let you know that the address for this corporation was 3211-SW 1-14~~
ct and I moved from there since 1996. I never received any letter saying that the corporation was gonna be closed. Recently on the internet I checked and I noticed that the corporation was closed long ago. In addition, the corporation accountant never told me anything about it. I would appreciate so much if you can help reinstating the corp.

My new address is 11320 SW 46th Street Miami Fl 33165, any way the address is also on the application.

Sincerely Yours;

Handwritten signature of Joelus S. P. Luis.