

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

FILED

03 OCT 16 AM 9:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000072253

1. Corporation Name

SMITH INTERIORS, INC.

Principal Place of Business

Mailing Address

12212 HAMLIN BOULEVARD
WEST PALM BEACH FL 33412

12212 HAMLIN BOULEVARD
WEST PALM BEACH FL 33412

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

09/19/1995

5. FEI Number

65-0608092

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	SMITH, STEPHEN N.H.	12212 HAMLIN BOULEVARD	WEST PALM BEACH FL 33412
V	SMITH, MARIA D	12212 HAMLIN BOULEVARD	WEST PALM BEACH FL 33412

100023865961
10/16/03--01052--024 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SMITH, STEPHEN N.H.
12212 HAMLIN BOULEVARD
WEST PALM BEACH FL 33412

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

Steph N.H. Smith
REGISTERED AGENT MUST SIGN

Date 10-14-03

11. 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:

Steph N.H. Smith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)

TO WHOM IT MAY CONCERN, THIS IS
THE ONE AND ONLY LETTER OR PAPERWORK
I HAVE RECIEVES THIS YEAR, I SPOKE TO
A LADY AT THIS PHONE NUMBER 850245-6051
AND SHE TOLD ME TO WRITE THIS LETTER,
AND PUT A CHECK FOR \$15000 TO REIM STATE
MY COMPANY,

THANK YOU

Steph Smith

561-315-6347