

PLEASE READ ALL INSTRUCTIONS BEFORE (

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

Feb 01 1999 8:00 am

Secretary of State

DOCUMENT # P96000011398

1. Corporation Name

DIAMOND TOUCH MARBLE & GRANITE, INC.

Principal Place of Business

800 N.W. 12TH TERR.
SUITE 4
POMPANO FL 33069

Mailing Address

800 N.W. 12TH TERR.
SUITE 4
POMPANO FL 33069



VB

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/06/1996

5. FEI Number

65-0643108

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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	SKOULARICOS, CHRIS	10142 ROYAL PALM BLVD	CORAL SPRINGS FL 33065
VP	VEIRA, AVEUSTO	530 N.E. 47TH ST, APT #107	BOCA RATON FL 33030
P	SKOULARICOS, CHRIS	2134 Sea Pines Way	Coral Springs, FL 33071
VP	LOPES, BERT	1621 S.W. 47th AVE	Pompano, FL 33060

100002766871 -- 3
02/08/99 01012-000
****908.75 ****908.75

8. Name and Address of Current Registered Agent

SKOULARICOS, CHRIS
10142 ROYAL PALM BLVD
CORAL SPRINGS FL 33065

9. Name and Address of New Registered Agent

Name SKOULARICOS, CHRIS
Street Address (P.O. Box Number is Not Acceptable)
2134 Sea Pines Way
Suite, Apt. #, Etc.

City CORAL SPRINGS, State FL Zip Code 33071

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

REGISTERED AGENT MUST SIGN

Date 12/30/98

11. This corporation owes or has paid 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRIS SKOULARICOS

12/30/98 (924) 946-9486

CR2E040 (9/98)