

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

00 JAN 20 PM 2:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PA6000019356

1. Corporation Name

Terry's Tile, Inc.

2. Principal Office Address

2212 Diamond Drive
Suite, Apt. #, etc.

3. Mailing Office Address

2212 Diamond Drive
Suite, Apt. #, etc.

REINSTATEMENT 97-02

City & State

Orlando Fla

Zip

32807

Country

Orange

City & State

Orlando Fla

Zip

32807

Country

Orange

4. Date Incorporated or Qualified
To Do Business in Florida

2/29/97

5. FEI Number

593368435

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Name and Address of Current Registered Agent

Name

Terry Alberson

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

2212 Diamond Drive

Suite, Apt. #, etc.

City

Orlando

700003116477-8

-01/31/00--01113--006

***1208.75 ***1208.75

State

FL

Zip Code

32807

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

Terry Alberson
REGISTERED AGENT MUST SIGN

Date 1/17/00

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 |
|----------------|--------------------------------------|---|-------------------------|
| <u>P Pres.</u> | <u>Terry Alberson</u> | <u>2212 Diamond Drive</u> | <u>Orlando FL 32807</u> |
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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:

Terry Alberson Terry Alberson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/17/00

Daytime Phone #

407/5096877