

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 13 PM 1:06

DOCUMENT # P96000079042

1. Corporation Name

MAJESTIC FLOORING, INC.

Principal Place of Business

Mailing Address

813 U.S. HWY 41 NORTH
RUSKIN FL 33570

813 U.S. HWY 41 NORTH
RUSKIN FL 33570

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

09/24/1996

5. FEI Number

59-3406515

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, DANIEL M	815 BLUE HERON BLVD 806	RUSKIN FL 33570

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SMITH, DANIEL M SR.
815 BLUE HERON BLVD
RUSKIN FL 33570

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

Daniel M. Smith
REGISTERED AGENT MUST SIGN

Date 10/8/03

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:

Daniel M. Smith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel M. Smith 10/8/03

Date

813-645-5213

Daytime Phone #

CR2E040 (7/03)

LESS OVERHEAD FOR US MEANS MORE UNDERFOOT FOR YOU!



Majestic

Flooring, Inc.

- Flooring
- Ceramic Tile
- Wood
- Vinyl

813 TAMiami TRAIL (H'WAY 41 N.)
RUSKIN, FLORIDA 33570

Tel: (813) 645-5213 • Fax: (813) 645-2363 • Eves: (813) 645-1155

SOLED TO: Department of State
ADDRESS: Division of Corporation
P.O. Box 6327
CITY: Tallahassee, FL 32314
TELEPHONE NO.: Document #P96000079042 DATE 10/8/03

Ref FCI # 59-34065 15

DESCRIPTION	UNIT PRICE	AMOUNT
<i>I have not received any UBR forms for the year 2003. I would like you to wave the late fee since the application for reinstatement is the only form I have received. I have completed the application and enclosed a check for \$150.00</i>		
<i>Thank you</i> <i>Donald P. Smith</i>		
It is agreed that the total balance due will be paid at completion of job. A service charge of 1½% per month (18% APR) or the highest rate allowed by law, whichever amount is less, will be applied to all past due accounts. and the undersigned shall be liable for any necessary collection costs. All goods remain the property of Majestic until paid for. All pricing subject to final audit. Not responsible for wood molding or cutting of doors. NO REFUND ON SPECIAL ORDER MERCHANDISE.		
Sub-Total		
Sales Tax		
TOTAL		
Deposit		
BALANCE		

Customer Signature _____

THANK YOU