Received Jan-08-02 10:44am from 1 727 863 9956 → TED SHARP CPA PA page 1
Tuesday, January 08, 2002 9:49 AM Judy Thompson 1-727-863-9956 p.01

1Q2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
02 JAN 9 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000019806

1. Corporation Name
J.T.'s Tile,Inc.

01-02 UBR

2. Principal Office Address		3. Mailing Office Address	
9035 Seeley Lane		9035 Seeley Lane	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Hudson ,Florida		City & State: Hudson ,Florida	
Zip: 34669	Country: Pasco	Zip: 34699	Country: Pasco

4. Date Incorporated or Qualified To Do Business in Florida: 2/27/97

5. FEI Number: 59-3443566 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: Jack Thompson

600004853186--1
02/01/02--01044--016
****300.00 ****300.00

Street Address (P.O. Box Number is Not Acceptable): 9035 Seeley Lane

Suite, Apt. #, Etc.

City: Hudson | State: FL | Zip Code: 34669

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0305 or 617.0503, F.S.

Signature of Registered Agent: Jack Thompson Date: 1-8-02
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Jack Thompson	9035 Seeley Lane	Hudson , Fl 34669
			LS

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: Jack Thompson 1-8-02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2082

J.T.'S TILE, INC
9035 SEELEY LANE
HUDSON, FL 34669
1-727-819-0789

Department of State
Division of Corporations
409 East Gaines St.
Tallahassee, FL 32399

To whom it may concern,

We did not receive the Uniform Business Report for the year 2001. Would you please wave the reinstatement fee for that year. Enclosed is a check for $300.00 for the year 2001 and for this year 2002, along with the UBR for this year as well.

We are sending a prepaid courier package for this to be mailed back to us. In the mean time, if you could please fax a copy of the reinstatement, it would be greatly appreciated. Our fax number is 1-727-863-9956.

Thank you,

Judy Thompson