

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DOCUMENT # P9 70001054 22

1. Corporation Name

Rembrandt Surface Systems

2. Principal Office Address

3657 Oak Grove Dr

Suite, Apt. #, etc.

Sarasota FL.

City & State

Zip

34243

Country

U.S.

3. Mailing Office Address

3657 Oak Grove Dr

Suite, Apt. #, etc.

City & State

Sarasota FL.

Zip

34243

Country

US

600004547886--8

-08/22/01--01007--007

***300.00 ***300.00

4. Date Incorporated or Qualified
To Do Business in Florida

12-16-97

5. FEI Number

650798566

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$5.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Ameri Lawyer

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

343 Almeria Ave

Suite, Apt. #, Etc.

N/A

City

Coral Gables, FL. 33134

State

FL

Zip Code

33134

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

REGISTERED AGENT MUST SIGN

Date 08-02-2001

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
Pres.	Thomas J. Bentley	3657 Oak Grove Dr	Sarasota, FL. 34243

SP

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 statement 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 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

08-02-2001 (941) 809-2018

Date

Daytime Phone #

CR2001 (9/00)



REMBRANDT SURFACE SYSTEMS, INC.

- Terrazzo & Marble Restorations
- Striping & Resealing
- Diamond Grinding & Honing
- Historical Restorations

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Please note: our Co had not
Received the notice to file due
to the fact, our adress was changed
and Postoffice did not forward.
The Lady @ office said the
Fee was \$300⁰⁰.

Parker

TJB

(941) 809-2018