

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 DEC 23 AM 10:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2002 4BR  
DOCUMENT # P98000065368

1. Corporation Name

Vintage Tile & Marble, Inc.

2. Principal Office Address

911 South 58th. Avenue

Suite, Apt. #, etc.

A

City & State

Hollywood, Florida

Zip

33023

Country

USA

3. Mailing Office Address

911 South 58th. Avenue

Suite, Apt. #, etc.

A

City & State

Hollywood, Florida

Zip

33023

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

7/24/98

5. FEI Number

65-085269

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$6.75 Additional Fee required  
for a Certificate of Status

12/23/02 0114 006 ISO.W

**7. Name and Address of Current Registered Agent**

Name

Francesco Salemi

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

1041 South Park Road

Suite, Apt. #, Etc.

112

City

Hollywood

State

FL

Zip Code

33021

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 12/19/02

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.	Francesco Salemi	1041 South Park Road Apt # 112	Hollywood, FL 33021

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Francesco

12/19/02

Date

(904) 966-8833

Daytime Phone #

CR2E081 (9/01)



# VINTAGE

TILE & MARBLE, INC.

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TO: Department Of State  
Corporation Reinstatement Division


FROM: Vintage Tile & Marble, Inc  
Document # P98000065368

DATE: December 19, 2002

To Whom It May Concern:

I am providing this letter to waive the \$600.00 reinstatement fee under our Corporation. We never received the annual report because the wrong mailing address is on file. On our 2001 Uniform Business Report (UBR), we made address changes. The mailing address of the business and officer was changed on that report. However, the changes were not updated and the 2002 report must have been mailed to the wrong address. I have attached a copy of the report as a reference. I have enclosed a check for \$150.00 for the Annual Report and Corporate Supplemental Fee. Please make the correction for the mailing address and update our account with an ACTIVE STATUS as soon as possible. Feel free to contact me at the number below if any further information is needed.

Thank You,



Francesco Salemi