PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.			
CORPORATION REI ALABA	FLORIDA DEPARTMENT OF STATE, Katherine Harris Secretary of State DIVISION OF CORPORATIONS	COMPLETING THIS FORM. 200\ ~ U & Q & FILEU PYISION OF CORPORATIO 01 OCT 29 AM 11: 20	
	20188000	<i>₹</i>	
1. Corporation Name. PRIMA MARBLE AND GO	eavite FABRICATION, INC.		
2. Principal Office Address	3. Mailing Office Address	-	
1223 JACKSON STREET	1223 TACKSON STREET Suite, Apt. #, etc.		All markets and the second sec
		Date Incorporated or Qualified To Do Business in Florida	
City & State	City & State 11 Sty wood , Ft. 33019	5. FEI Number Applied For	
Hollywoo, Fl. 33019 country	Zip Country	6. Not Applicable	
33019 JSA	33019 USA	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee require for a Certificate of Status	
Name	7. Name and Address of Current Registe	ered Agent	Transaction of the control of the co
C. KEUN Street Address (P.O. Box Number is N	Cross, E.A.		AMERICANA PARA
801 South		5000046796152 	2
Suite, Apt. #, Etc.	, , , , , , , , , , , , , , , , , , ,	****150.00 **** 50.00) In the second
City WOLLYWOOD		State Zip Code FL 330 20	State - Shirt
8. 1, being appointed the registered agent of the abo	ove named corporation, am familiar with and accept the	obligations of section 607.0505 or 617.0503, F.S.	(90/6)
Signature of Registered Agent REGISTERED AGENT MUST SIGN			CR2E081
	d/or Director (Florida nonprofit corporations must list at I		
Titles Officers and/or Directors		or City / State / Zip	
P harco SALFMI	1223 JACKSON STO HOLLYWOOD, FL.		
VP APRIL SOLEMI	1223 JACKSON ST	REFT HULLY WOOD FL 33020	A TOTAL CONTROL OF
			_
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		A ry 19	
,			-
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 filling 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: MANCE SALEMI 10 25 2001 954 - G05 - Z538			
	RINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #	

Accounting, Consulting, IRS Representation, & Strategic Tax Planning.

801 South Federal Highway • Hollywood, FL 33020 • Telephone (954) 922-1903 • Facsimile (954) 926-6770

R. Kevin Cross, E.A., 🕈 - Enrolled Agent, Accountant, Tax Specialist, & Financial Counselor & Advisor.

V-R. Kevin Cross, E.A. & Steven R. Danialson E.A. - are enrolled to represent taxpayers before the Internal Revenue Service.

Steven R. Danielson, EA., P. Enrolled Agent, Accountant, Certified Quickbooks Pro Advisor, & Member NASD & SIPC

Thursday, October 25, 2001

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Ref.: Renewal of 2001 Annual Report for Prima Marble & Granite Fabrication - (P98000068495) FEI:65-0856998

Dear Sir or Madam:

The corporation above named Prima Marble & Granite Fabrication - 65-0856998 located at 1223 Jackson Street, Hollywood, Florida 33019, has been recently dissolved for failing to pay the Annual Renewal Fee in the amount of One Hundred and Fifty Dollars (\$ 150.00) to the State of Florida for 2001.

Please consider the fact that they didn't receive the Annual Renewal Notice. We would like to request, on behalf of our client, the reinstatement of this corporation based on the payment of One Hundred dollars (\$ 150.00) which represents this year's (2001) annual renewal fee.

Please, take our request in consideration and reply as soon as it's precessed.

Cordially yours,

R. Kevin Cross, E.A.

Enrolled Agent & Tax Specialist.