

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 21 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000088202**

1. Corporation Name

UNIVERSAL STONE, INC.

Principal Place of Business

**305 W. 27TH STREET
HIALEAH FL 33010**

Mailing Address

**305 W. 27TH STREET
HIALEAH FL 33010**



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/15/1998

5. FEI Number

65-0871027

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	PARETAS, JOEL	305 W. 27TH STREET	HIALEAH FL 33010
V	LOPEZ, MANUEL	305 W. 27TH STREET	HIALEAH FL 33010

8. Name and Address of Current Registered Agent

**PARETAS, JOEL
8781 SW 145TH TERR
HIALEAH FL 33018**

9. Name and Address of New Registered Agent

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date **10/16/03**

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/16/03

CR2E040 (7/03)

UNIVERSAL STONE, INC.
325 W 27TH ST.
HIALEAH, FL. 33010

October 16, 2003

Division of Corporation
Annual Report/Reinstatement Section
P. O. Box 6327
Tallahassee, Fl. 32314

To Who it make concern:

As per telephone conversation with Mr. Johnstone who told me, to send the included form with a check for \$400.00, because as explained him I have not received before any other form until now.

Please, accept my apology for the late filing, your prompt attention to this matter will be appreciated.

Sincerely your

Joel Paretas
President