

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

Blair

01 JAN 12 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000101268

1. Corporation Name

MARK SIBILIA TILE DESIGNS, INC.

Principal Place of Business

Mailing Address

757 36TH AVE NORTH
ST PETERSBURG FL 33704

757 36TH AVE NORTH
ST PETERSBURG FL 33704



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

2. New Principal Office Address, If Applicable

757 32ND AVE N

3. New Mailing Office Address, If Applicable

757 32ND AVE N

4. Date Incorporated or Qualified
To Do Business in Florida

11/16/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0966747

Applied For

Not Applicable

City & State
St. Petersburg Florida

City & State
St. Petersburg Florida

Zip
33704

Country
USA

Zip
33704

Country
USA

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
DP	SIBILIA, MARK	8175-36TH AVE NORTH	ST PETERBURG FL 33710
DST	BENSON, RICHARD D	757-36TH AVE NORTH	ST PETERSBURG FL 33704
			300003568313--2 -01/24/01--01002--014 ****308.75 ****308.75

8. Name and Address of Current Registered Agent

BENSON, RICHARD D
757-36TH AVE NORTH
ST PETERSBURG FL 33704

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.

Signature of
Registered Agent

Richard D Benson

Date 1-8-01

REGISTERED AGENT MUST SIGN

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:

Richard D Benson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-01

Date

727-641-3760

Daytime Phone #

CR2E040 (8/00)

MARK SIBILIA TILE DESIGN, INC.

PG 2 of 2

January 8, 2001


Division of Corporations
Annual Report / Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314-6327

Dear Sir or Madam:

We spoke with your office today and informed them that we did not receive notification regarding the annual report prior to this was dated December 2000. It is possible that the incorrect address typed on the report was the problem, but regardless, this was our only notification. Therefore, we are requesting to please waive the late fee which would incur because of this. We have corrected the address in the application and enclosed a check for \$300.00 which will pay \$150.00 for the year 2000 and \$150.00 for the year 2001. An additional \$8.75 is enclosed with the 2001 payment for a certificate of status.

We appreciate in advance your consideration to us and we have additionally included a self-addressed pre-paid envelope for the return of the certificate.

Sincerely,



Richard D. Benson
Owner and Registered Agent for Mark Sibilis Tile
Design, Inc.