PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. PEGE 1067

## APPLICATION **FOR**

## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

**DIVISION OF CORPORATIONS** 

DO	CU	ME	NT	#	

V28483

1. Corporation Name

BUY-THE-SQUARE-YARD INC.

Principal Place of Business

801 N. DIXIE HWY.

W. PALM BCH. FL 33401 US

Mailing Address

801 N. DIXIE HWY. W. PALM BCH. FL 33401

US

FILED

00 OCT 30 AMII: 31

SECRETARY OF STATE TALLAHASSEE, FLORIDA

If above a	ddresses are incorrect in any way, line throu	gh incorrect in	formation and enter o	correction below.				
New Principal Office Address, If Applicable     3. New Mailing Office Address, If Applicable					Date Incorporated or Qualified     To Do Business in Florida			
Suite, Apt.		Suite, Apt. #,		= 1100 ( _	5. FEI Number		1/09/1992	
City & State		City & State			5. FEI Number	65-0310658	Applied For Not Applicable	
City & State WEST PALM BEALITY FL WEST W		IMBEACH, FL		c				
Zip 334	OI POLM BEACH	<sup>Zip</sup> 3340		n BEACH	<u></u>		5 Additional Fee required or a Certificate of Status	
7. Names	and Street Addresses of Each Officer and/or	Director (Flor						
Title(s) 1	Name of Officers and/or Directors			eet Address of Each icer and/or Director		City / Sta	ate / Zip	
D	HARPER, G		155 40TH ST			WPB FL 33407		
Р	HARPER, B G		1551 40TH ST			WPB FL 33407		
Ŧ	HARPER, J H		1551 40TH ST			WPB FL 33407		
		_			6	00003470	)666 <u>7</u>	
,						-11/20/00 ****150.00	01118018   ****150.00	
* '						00 UB12	70	
8. Name and Address of Current Registered Agent					Name and Address of New Registered Agent			
				Name_	< H. H.	arpete Sr.		
WHALEN, TIMOTHY LESO. JAMES H. HARPER SR.				Street Address (P.O. Box Number is Not Acceptable)				
301 CLEMATIS ST. STE. 200			Suite, Apt. #. Etc.					
W. PT	LM BCH. FL 33401			Calla, Apr. II, Clo	•			
					IM BEZ	cu  FL	Zip Code 3340	
10. I, being	appointed the registered agent of the above				bligations of Secti	ion 607.0505, F.S.	•	
Signature o						Data 11-1-2	000	

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 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.

REGISTERED AGENT MUST SIGN

PAGETOLZ



## Buy The Square Yard Inc.

FINE QUALITY FLOORING

## **MEMO**

**DATE:** 11/01/00

TO: MR. TYRONE SCOTT

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FROM: JAMES HARPER, SR.

BUY THE SQUARE YARD

RE: APPLICATION FOR REINSTATEMENT

Per today's phone conversation, I am enclosing an application for reinstatement of corporation. As I stated, I was not aware that the annual report had not been filed. I have since been informed that the attorney acting as registered agent is no longer practicing. Until receiving the notice of dissolution, I assumed the annual report had been filed.

Thank you for your assistance in this matter.