PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMEN



FLORIDA DEPARTMENT OF STATE Glenda-E. Hood

Secretary of State DIVISION OF CORPORATIONS

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1. Corporation Name

ELEGANT MARBLE, INC.

Principal Place of Business

Mailing Address

2724 NE 10TH STREET POMPANO BEACH FL 33062

US

-2724 NE 10TH STREET POMPANO-BEACH FL-93062 US

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

2. New Principal Office Address, It Applicable	3. New Mailing Office Address, It Applicable 335 HAWATHA WAY					
Suite, Apt. #, etc.	Suite, Apt. #, etc.					
MELBOURNE BCH FL	MELBOURNE BUT FL					
Zip Country	Zip Country					

FILED

03 OCT 23 AM 10: 13

Date Incorporated.or Qualified To Do Business in Florida	05/19/1992	_
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Cuito, Apt.	ii, 0to,	•	Guile, Apr. II,				5	. FEI Number			Applied For
City & State	XUENE.	Ry FL	City & State	WIPNE	72-11	₽1			65-0333444		Not Applicable
Zip 3399		Country	Zip 339!	• • • • • • • • • • • • • • • • • • • •	Country	us	6	•	OF STATUS DESIRED		ditional Fee required ertificate of Status
7. Names	and Street Ad	dresses of Each Officer and	or Director (Flo	rida nonprof	it corporation	ons must list a	at least 3	3 directors)		· · · · · · · · · · · · · · · · · · ·	
Title(s)	2	Name of Officers and/or Directors		3		t Address of I er and/or Dire			4	City / State / Z	ip
Р .	MARZANO	, PETER		27 24 NE	10TH S TI	FEL-YEN	s Him Bourn	MINAWA EBUH FI 33951	POMPANO BEAC	H-FL 33082	Same — As left
С	KELLER JF	R., HENRY A.		2724 NE	10TH ST	ICET	u		POMPANO BEAC	H-FL 33062	SAME -
							•	20 10/23/	002 40 5 03010730	4292)21 **1	50.00
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8. Name and Address of Current Registered Agent				9	Name and Address of New Registered Agent						
	NO, PETER	L grand REET				Name Street Addre	ss (P.O.	. Box Number i	s Not Acceptable)		
	ANO BEACH				<u></u>	Suite, Apt. #,	, Etc.				

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

State

Zip Code

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 pave the same legal effect as if made under oath.

SIGNATURE:

10/20/03 321-632-4460
Date Daytime Phone #

RE: ELEGANT MARBLE, INC. DOCUMENT #V37123

To Whom It May Concern:

Please be advised that form was never forwarded to new address. Please change address to

47 - 6. Land

325 Hiawatha Way Melbourne Beach FL 32951

Enclosed please find check in the amount of \$150.00 for reinstatement.

Thank you for your cooperation in this matter.

Peter M. Margano