## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## APPLICATION FOR REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

V68890

1. Corporation Name

INTEGRITY CARPETS, INC.

Principal Place of Business

Mailing Address

12291 NORTHWEST 20TH COURT PLANTATION FL 33313

12291 NORTHWEST 20TH COURT PLANTATION FL 33313

FILED

03 NOV 10 AM 9: 18

SECHLIARY OF STATE FALLAHASSEF, FLORIDA



If above	addresses are	incorrect in any way, line	through incorrect	information a	ınd enter	correction below.	REINS	TATEMEN'	T	
				New Mailing Office Address, If Applicable  Suite, Apt. #, etc.			Date Incorporated or Qualified     To Do Business in FlorIda     10/06/1992			
							5. FEI Numbe	5. FEI Number Applie		Applied For
City & Stai	te	City & State				65-0360326 Not Ap  6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fe for a Certificate of			Not Applicable	
Zip Country			Zip	Zip Count				y 		
7. Names	and Street Ad	dresses of Each Officer a	nd/or Director (Fl	orida nonprof	it corpora	itions must list at le	east 3 directors)			
Title(s) 1	Name of Officers and/or Directors			Street Address of Each Officer and/or Director				City / State / Zip		
P	SCHAFER, BRIAN K.			12291 NW 20 CT.				PLANTATION FL 33323		
ST	SCHAFER, KAREN L.			12291 NW 20 CT.				PLANTATION FL 33323		
VP	OWNES, MERLE			5392NW 106 DR.			<u> </u>	CORAL SPRINGS FL 33076		
					700024572017 11/10/0301098014 **150.00					.00
	8. Narr	e and Address of Curre	nt Registered Ag	nent .		T	9. Name and	Address of New Registered	Agent	
						Name				
SCHAFER, BRIAN K.					Chart Address (D.O. Day Nur			in Not Aggertable)		
12291 NW 20TH CT.					Street Address (P.O. Box Number is Not Acceptable)					
PLANTATION FL 33323				Suite, Apt. #, Etc.						
					City			State FL		de
10. I, bein	g appointed the	e registered agent of the	above named corp	oration, am f	amiliar wi	th and accept the o	obligations of Sect	ion 607.0505, F.S. or 617.050	5, F.S.	
Signature Registered	of d Agent	Zuan K.	Schafe REGISTERED A	GENT MUST	Peg, a	azent		Date 10/25	103	
11   0046	uthat I am an	officer or director or the re	oniver or tructes a	mpowored to	OVERNIC	thic application on	provided for in the	antor 607 or 617 E.S. Liturihor	cortifu th	at when filing

1. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/25/03 954-8881

e Daytime Pho

## INTEGRITY CARPETS, INC

6741 W. Sunrise Blvd, #9 Plantation, FL 33313 954-581-8881

November 5, 2003

Dear Sir,

I did not receive the Uniform Business Report form from you for this year. Please reinstate us as a corporation. I am also asking that you please waive the reinstatement fee.

Sincerely,

Brian K Schafer, Pres

Bria X. Schafer, Pres.