

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUN -3 AM 10:15

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V69975

1. Corporation Name

SOUTH COAST INTERIORS, INC.

REINSTATEMENT

03-04

2. Principal Office Address

2121 Country Club Dr

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

EUSTIS, FL.

City & State

Zip

32726

Country

USA.

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

OCT. 5, 1992

5. FEI Number

65-0366015

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

ANNE LOFARO

Street Address (P.O. Box Number is Not Acceptable)

2121 Country Club Dr.

Suite, Apt. #, Etc.

City

EUSTIS

State

FL

Zip Code

32726

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Anne Lofaro

Date

5/27/04

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES	ANNE LOFARO	2121 Country Club Dr.	EUSTIS, FL. 32726
Sec/Treas	TRELL A. ADAMS	2121 Country Club Dr.	EUSTIS, FL. 32726

10. 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:

Anne Lofaro, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/27/04 352-3576221

Daytime Phone #

6/18/04

212

ANNE L. ADAMS

2121 Country Club Dr.
Eustis, FL 32728

Telephone 352-357-6221
Fax 352-357-2224

e-mail anneladams@earthlink.net

May 27, 2004

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Reinstatement of a Corporation

Dear Sirs:

We are requesting reinstatement of our corporation due to the following reason:

We never received the notice or form for the annual report for 2003 and 2004.
We moved but our mail was forwarded for one year so we should have received it,
but did not.

Please reinstate our Corporation. We are enclosing \$300.00 (\$150.00 for 2003 and 2004
Franchise fees) to cover the franchise fee cost. Reinstatement form enclosed.

Thank you for your consideration.

Sincerely yours,



Anne Lofaro
President

Enclosure