

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 22 AM 10:45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P00000064099**

1. Corporation Name

PITA KING, INC.

Principal Place of Business

Mailing Address

4913 SOUTHWEST 32 WAY
FORT LAUDERDALE FL 33312

4913 SOUTHWEST 32 WAY
FORT LAUDERDALE FL 33312

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

2. New Principal Office Address, If Applicable

5650 STIRLING RD

3. New Mailing Office Address, If Applicable

5650 STIRLING RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HOLLYWOOD, FL

City & State

HOLLYWOOD, FL

Zip

33021

Country

USA

Zip

33021

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

07/03/2000

5. FEI Number

65-1020686

Applied For

Not Applicable

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
PSD	ANIDJAR, BARUCH Y	4913 SOUTHWEST 32 WAY 5650 STIRLING RD	FORT LAUDERDALE FL 33312 HOLLYWOOD, FL 33021

300024012453
10/22/03--01038--016 **150.00

8. Name and Address of Current Registered Agent

BENGIO, DANIEL
4100 N 42ND AVE
HOLLYWOOD FL 33021

9. Name and Address of New Registered Agent

Name

BENGIO, DANIEL

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

2525 N STATE RD 7, #115

Suite, Apt. #, Etc.

#115

City

HOLLYWOOD

State

FL

Zip Code

33021

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

[Signature]

REGISTERED AGENT MUST SIGN

Date **10/13/03**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/13/03

Daytime Phone #

CR2E040 (7/03)



HOFFMAN, LEVY, BENGIO & COHEN, PL
Certified Public Accountants and Consultants

2525 N. STATE ROAD 7 • SUITE 115
HOLLYWOOD, FL 33021
TEL: (954) 966-1141 • FAX: (954) 966-2474

October 13, 2003

Uniform Business Report
Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Pita King, Inc.

To Whom It May Concern:

Enclosed please find a copy of the UBR for 2003 for Pita King, Inc. as well as a check for \$150.00.

Both the corporation and the registered agent changed addresses during 2003 and only received the forwarded mail recently.

At this time, we respectfully request that you waive the late penalties and accept the enclosed check as full payment. Should you have any questions, please do not hesitate to contact me at 954-966-1141 x-222.

Thanking you in advance,

Sincerely,

Daniel Bengio, CPA

Encl.