

**2006 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Dec 05, 2006  
Secretary of State**

DOCUMENT# P01000023820

Entity Name: MORELLI & SON'S CORP.

**Current Principal Place of Business:**

5500 MILITARY TRAIL, SUITE 48  
JUPITER, FL 33458

**New Principal Place of Business:**

**Current Mailing Address:**

5500 MILITARY TRAIL, SUITE 48  
JUPITER, FL 33458

**New Mailing Address:**

FEI Number: 65-1078719      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MORELLI, AIDA C  
5300 WASHINGTON ST., APT. E101  
HOLLYWOOD, FL 33021 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: AIDA MORELLI

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MORELLI, AIDA C  
Address: 5300 WASHINGTON ST., APT. E101  
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD ( ) Delete  
Name: BRADY, ANN M  
Address: 5300 WASHINGTON ST., APT. E101  
City-St-Zip: HOLLYWOOD, FL 33021

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AIDA MORELLI

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PD

12/05/2006

\_\_\_\_\_  
Date