


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1082

APPLICATION FOR REINSTATEMENT



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

FILED

05 APR -8 PM 4:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000085805

1. Corporation Name

BINETTI, INC

Principal Place of Business

Mailing Address

8269 NW 66 STREET
MIAMI FL 33166

8269 NW 66 STREET
MIAMI FL 33166

[Handwritten initials]



REINSTATEMENT 03-05

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

2. New Principal Office Address, If Applicable 5640 S.W. 2 nd CT.		3. New Mailing Office Address, If Applicable 5640 S.W. 2 nd CT.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Plantation, FL.		City & State Plantation, FL.	
Zip 33317.	Country U.S.A.	Zip 33317.	Country U.S.A.

4. Date Incorporated or Qualified To Do Business in Florida 08/30/2001	
5. FEI Number 65-1134035	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	BINETTI, DIEGO P	71 NE 97 STREET 5640 S.W. 2 nd CT	MIAMI SHORES FL 33138 Plantation, FL 33317
STD	KWAN LEE, YUEN	71 NE 97 STREET 5640 S.W. 2 nd CT	MIAMI SHORES FL 33138 Plantation, FL 33317
STD	LEE, YUEN KWAN		

700054124357
05/10/05--01008--009 **450.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
LEE, YUEN KWAN YUEN KWAN 8269 NW 66 STREET MIAMI FL 33166		Name LEE YUEN KWAN Street Address (P.O. Box Number is Not Acceptable) 5640 S.W. 2 nd CT. Suite, Apt. #, Etc. City Plantation.	
		State FL	Zip Code 33317.

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 4/01/05

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]* YUEN Date 4/01/05 917-677-5852
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E040 (7/03)

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5640 S.W 2nd CT
Plantation, FL 33317
917 627 5852

April 1, 2005

RE: Request for Late Fee Waiver.
Application For Reinstatement
Binetti Inc.
Document # P0100008505

To Whom It May Concern:

I am writing with regards to the application for reinstatement Binetti Inc.

The Renewal for the years 2002, 2003, 2004 and 2005 were never received for Binetti Inc. therefore I would like to request for the late fee to be waived.

Please see enclosed the updated reinstatement form and a check for the balance of \$450 owing as advised by the customer service advisor.

Kind regards

Yuen Kwan Lee
President
Binetti Inc.