

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State  
BUREAU OF CORPORATIONS

FILED

02 OCT 28 AM 10:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000098307

1. Corporation Name

BERTETTI INTERNATIONAL INC

Principal Place of Business

6010 RED PLUM CT  
TAMARAC FL 33321-6353

Mailing Address

6010 RED PLUM CT  
TAMARAC FL 33321-6353



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

10/03/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

Not Applicable

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	BERTETTI, MARCO A	6010 RED PLUM CT	TAMARAC FL 33321

600008637326  
10/28/02--01128--003 \*\*150.00

8. Name and Address of Current Registered Agent

BERTETTI, MARCO A  
6010 RED PLUM CT  
TAMARAC FL 33321-6353

9. Name and Address of New Registered Agent

Name \_\_\_\_\_  
Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
Suite, Apt. #, Etc. \_\_\_\_\_  
City \_\_\_\_\_ State **FL** Zip Code \_\_\_\_\_

CR2E040 (8/02)

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 REQUIRED**

Date 10-24-02

REGISTERED AGENT MUST SIGN

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 REQUIRED**  
MARC A BERTETTI

10-24-02 954-554-8507

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

Fort Lauderdale, October 24 2002

To whom it may concern,

As the president of the Corporation "Bertetti International Inc." -I hereby ~~inform~~ you that the reason why I didn't file for the 2002 corporation annual report/uniform business report, is because I have never received any previous notices or the above mentioned uniform business report.

As president of this corporation it is my intention to keep this business open and operational, and this is why I am sending you this request.

I include with this letter a company check for \$150.00, and I respectfully request revocation of the dissolution and reinstatement of "Bertetti International Inc."

I remain awaiting for your response.

Best\_Regards

A handwritten signature in black ink, appearing to read 'Marco Bertetti', written in a cursive style with a large initial 'M'.

Marco Bertetti / President