

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000103988

FILED
Oct 23, 2009
Secretary of State

Entity Name: BENITO'S ITALIAN CAFE & PIZZERIA, INC.

Current Principal Place of Business:

10305 TRIPLE CROWN AVE
JACKSONVILLE, FL 32257 FL

New Principal Place of Business:

9475 PHILIPS HWY SUITE 8
JACKSONVILLE, FL 32256 FL

Current Mailing Address:

10305 TRIPLE CROWN AVE
JACKSONVILLE, FL 32257 FL

New Mailing Address:

9475 PHILIPS HWY SUITE 8
JACKSONVILLE, FL 32256 FL

FEI Number: 20-3537963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARBI, ARBEN
10305 TRIPLE CROWN AVE
JACKSONVILLE, FL 32257 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: BRETT ISAAC

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: P () Delete
Name: LARI, ARBEN
Address: 10305 TRIPLE CROWN AVE
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP () Delete
Name: GJONDREKAJ, RAJMONDA
Address: 10305 TRIPLE CROWN AVE
City-St-Zip: JACKSONVILLE, FL 32257

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 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: LARI ARBEN

Electronic Signature of Signing Officer or Director

PRES

10/23/2009

Date