FILED PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

797000084819 DOCUMENT # 1. Corporation Name

C.C.N. World Corporation

02 APR 30 AM 11:55

SECRETATY OF STATE TALLAHASSEE, FLORIDA

1	0000549191/12
	-05/08/0201046022
	****344.75 ****343.75.

	• •				-01046022	
2. Principal Office	Address	3. Mailing Off	ice Address			
16561 Lak	ke Tree Drive			1	,	
Suite, Apt. #, etc.		Suite, Apt. #, e	tc.			
				4. Date Incorporated or Qualified To Do Business in Florida 10/2	1/97	
City & State		City & State				
7.7 T			-	5. FEI Number 650823984	Applied For	
Weston, F1,003			····	030023904	Not Applicable	
Ζίφ	Country	Zip	*Country	6 \$9.75		
33326	Broward			CEDITEICATE DE STATUS DESIDER V	\$8.75 Additional Fee required for a Certificate of Status	
	•	7. Na	me and Address of Current R	Registered Agent		

7. Name and Address of Current Registered Agent				
Moody, Jones, Montefusco & Krause, P.A.	·			
Street Address (P.O. Box Number is Not Acceptable) 1333 S. University Drive				
Suite, Apt. #, Etc.				
Suite 201				
City Plantation	State FL	Zip Code 33324		

						_
8.	I, being appointed the registered agent of the above named corporation, am familiar with and a	accept the	obligati	ons of sec	tion 607.0505 or 617.0503,	F.S

Signature of

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	
Pres.	NICOLAS Nicholas Sanseviero Rakus	1112 Weston RD. #229	Weston, Fl 33326	
Vice	Pres/			
Tres.	Carmela Sanseviero Rakusa	16561 Lake Tree Drive	Weston, F1 33326	
Vice	Pres/			
Sec.	Carolina Sanseviero Rakusa	16561 Lake Tree Drive	Weston, Fl 33326	
		1		
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10. 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 signature shall have the same regal effect as if made under oath.

SIGNATURE:

AME OF SCHING OFFICER OF DIRECTOR AS Sanseviero Rakusa

(-602 954-349-8318

Daytime Phone #

y 5/7/02

Moody, Jones, Montefusco & Krause, P.A.

Attorneys at Law

Bank of America Building 1333 S. University Drive, Suite 201 Plantation, Florida 33324 Telephone (954) 473-6605 Telefax (954) 473-6855

STEVE E. MOODY
KENNETH M. JONES
FRANK A. MONTEFUSCO *
MATITHEW G. KRAUSE
MICHAEL J. INGINO
EDWARD N. PORT
MARIE P. MONTEFUSCO**

ROBERT M. LEVIN - Of Counsel ***
RONALD E. SHNIDER - Of Counsel ****

- * Also Admitted in New Jersey
- ** Also Admitted in California and Utah
- *** Also Admitted in New York and Connecticu

**** Also Admitted in Washington D.C.

May 6, 2002

Department of State Division of Corporation 409 East Gaines Street. Tallahassee, FL 32399

Attn.: Reinstatement Department, Justin Shivers

Re:

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C.C.N. World Corporation FEI Number: 650823984 Doc. No.: P97000084819

Dear Sirs:

I am the attorney for the above corporation. Enclosed please find the application for Corporation Reinstatement along with our trust account check in the amount of \$300.00. I would like the Secretary of State to reinstate the above corporation due to the fact that my clients did not receive the Annual Report for the years 2001 and 2002, and upon my investigation were surprised to find that the corporation had been dissolved for failure to file the Annual Report. I understand through my assistant, Lucie's conversation with Justin Shivers, that the Annual Report had in fact been returned to the Secretary of State.

Under the circumstances, we certainly would appreciate it if you would reinstate C.C.N. World Corporation and consider waiving the late charges and allow them to file their report with the normal annual filing fee. Please contact my assistant, Lucie Soto, at your earliest convenience at (954) 473-6605, ext. 307, if you are unable to accept the \$300.00 for the reinstatement.

Thank you for your cooperation and consideration.

Very truly yours,

STEVE E. MOO

SEM/ls Encl.

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State ofFlorida
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation: C.C.N. World Corporation
2. The mailing address of the corporation: 16561 Lake Tree Drive
Weston, Fl 33326
3. Date of incorporation/qualification: 10/1/97 Document number: P97000084819
4. The name and address of the current registered agent and office:
Nicola Sanseviero-Tierno
141 NE 3rd Ave. #604
Miami, Fl 33132
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)
Moody, Jones , Montefusco & Krause, P.A.
1333 S. University Dr., Ste 201
Plantation, F1 33324
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
5-6-02
NICOLAS Nicholas Sanseviero Rakusa, President
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
(ATCAL)
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Steve E. Moody President
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

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