PLEASE READ A	LL IMSTRUCTI	ONS BEFORE	OMPLETING THIS FUHM.
APUCATION AND	FLORID DEPAR	MIN	FILED
7 \FOA 7		ry of tale	- 99 NOV -5 PM 12: 26
EINST TEMENT	DIVISION OF	CORPORATIONS	
Corporation Name	5707		SECRETARY OF STATE TALLAHAGSEE, PLORIDA
MORETTINI FAI	MILY COR	₽.	
rincipal Place of Business	Mailing Address	D	
BRANDON, FL	33511		TOTALI BE INVESTIGATION STATEMENT SERVICE THE COMPANY OF THE COMPA
			1
If above addresses are incorrect in any way, line the New Principal Office Address, if Applicable	ough incorrect information: 3. New Mailing Office A	and enter correction below. address, if Applicable	4. Date incorporated or Qualified To Do Business in Florida 02-06-87
uite, Apt. #, etc.	Suite, Apt. #, etc.		8 FFI Number
ity & State	City & State		59-2776896 No
ip Country	Zip	Country	GERTIFICATE OF STATUS DESIRED State of Gertificat
Names and Street Addresses of Each Officer and	/or Director (Florida nonpr	ofit corporations must list at le	east 3 directors)
Tule(s) Name of Officers and/or Directors		Officer and/or Directo	of City / State / Zip
D CDONIK DONATE	TIME S	or W BRAND	ON BLYD BRANDON, FL
D FRANK MORE	110 544 36	75 11 51.11	3.331/
			9000304313 -11/19/9901004006 *****300.00 *****300.00
-	0.4	((()))	
		8-994K	
8. Name and Address of Curren		Name	9. Name and Address of New Registered Agent
FRANK MORETTIA	11 JR	Street Address	s (P.O. Box Number is Not Acceptable)
SUS W BRANDO	NDE	Suite, Apt. #, E	
ROANDON, FC	13511	City	State Zip Code
10. I, being appointed the registered agent of the a	none named compression &	m temiliar with and accept the	e obligations of Section 607.0505, F.S.
1 5 300 2	•	***	Date KE
	REGISTERED AGENT MU	ST SIGN	- Part
11. This corporation owes or Intangible Personal Prope	nas paid the cur erty tax due June	rent year 30. Yes 🔀	No (See other aide for inform on intangible tax.)
to the state of the same of th	pelver or trustee empowere securion has been eliminat	d to execute this application a ed, the corporate name satisfi of on this form do not qualify	as provided for in chapter 607 or 617, F.S. I further certify that files the requirements of section 607.0401 or 617.0401, F.S., tile for an exemption under section 119.07(3)(i), F.S. The information cath.
SIGNATURE:	SUNTEN NAME OF BURNIAN	RANK MORET OFFICER OR DIRECTOR	TINI JR 11-1-99 81368409:

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Florida Department of State Sandra B. Mortham Secretary of State Division of Corporations Annual Report/Reinstatement Section PO Box 6327 Tallahassee, FL 32314-6327

To Whom It May Concern:

We did not receive the corporate annual report form for 1998 and as per your records the form was returned and therefore we did not know that a report was due. It has since come to our attention that our corporation has been administratively dissolved.

We are enclosing the Application for Reinstatement along with the required annual fee for both 1998 and 1999 of \$150 each for a total of \$300. We respectfully request abatement of the penalty for late filing.

Your assistance in this matter is appreciated.

Yours truly

Frank Morettini Morettini Family Corp 505 West Brandon Blvd. Brandon, FL 33511