

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K40199**

1. Corporation Name

NUZZI BROTHERS, INC.

Principal Place of Business

Mailing Address

~~622 SE 20TH PL~~
~~CAPE CORAL FL 33990~~
~~US~~

~~622 SE 20TH PL~~
~~CAPE CORAL FL 33990~~
~~US~~

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

2. New Principal Office Address, If Applicable

1801 Brantley Rd #1602
Fort Myers, Fla
City & State

3. New Mailing Office Address, If Applicable

PO Box 60284
Fort Myers, Fla.
City & State

Zip
33907

Country
CEE

Zip
33906-0284

Country
CEE

4. Date Incorporated or Qualified To Do Business in Florida

10/20/1988

5. FEI Number

69-0087615

Applied For

Not Applicable

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	NUZZOLILLO, JOHN	622 SE 20TH PL	CAPE CORAL FL
D	NUZZOLILLO, DANNY	17200 E. LAKE DRIVE	NORTH FT. MYERS FL
ST	NUZZOLILLO, CANDACE	622 SE 20TH PL	CAPE CORAL FL
	No longer with company see below		000002339570-0 -11/05/97-01111-002 ****750.00 ****750.00
			REINSTATEMENT '97 SCC 11-3-97

8. Name and Address of Current Registered Agent

NUZZOLILLO, JOHN
622 S.E. 20TH PL.
CAPE CORAL FL 33990

9. Name and Address of New Registered Agent

Name John Nuzzolillo
Street Address (P.O. Box Number is Not Acceptable) 1801 Brantley Rd #1602
City, Apt. #, Etc. Fort Myers
City FL State FL Zip Code 33907

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.

Signature of Registered Agent

John Nuzzolillo

REGISTERED AGENT MUST SIGN

Date 10/28/97

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information on intangible tax.)

12. 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 118.07(3)(f), 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

John Nuzzolillo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/28/97 (941) 278-0013

CR2E040 (8/97)