

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# L31471

**FILED**  
**Oct 30, 2014**  
**Secretary of State**

**Entity Name:** NEW NEW YORK DELI, INC.

**Current Principal Place of Business:**

NEW NEW YORK DELI INC  
693 N ORANGE AVE  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

**Current Mailing Address:**

NEW NEW YORK DELI INC  
693 N ORANGE AVE  
ORLANDO, FL 32801 US

**New Mailing Address:**

**FEI Number:** 59-2982346

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KHORRAMIAN, MOHAMMAD, T  
693 N ORANGE AVE  
ORLANDO, FL 32801 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:** MOHAMMAD KHORRAMIAN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PVST  
**Name:** KHORRAMIAN, MOHAMMAD T  
**Address:** 693 N. ORANGE AVE.  
**City-St-Zip:** ORLANDO, FL 32801

I hereby 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 all other like empowered.

**SIGNATURE:** MOHAMMAD KHORRAMIAN

PVST

10/30/2014

Electronic Signature of Signing Officer or Director

Date