

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FOR REINSTATEMENT

FILED

02 NOV -4 PM 1:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # M21906

1. Corporation Name

SALVATORE'S PIZZERIA, INC.

Principal Place of Business

271 NE 6TH AVENUE  
DELRAY BEACH FL 33483-5514

Mailing Address

271 NE 6TH AVENUE  
DELRAY BEACH FL 33483-5514

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

10/14/1985

5. FEI Number

59-2608358

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	4 City / State / Zip
RD	MICELI, SALVATORE	271 ME 6TH AVENUE	DELRAY BEACH FL 33483
VD			

400008790524  
11/04/02--01096--021 \*\*150.00

8. Name and Address of Current Registered Agent

MICELI, SALVATORE  
271 NE 6TH AVENUE  
DELRAY BEACH FL 33444

9. Name and Address of New Registered Agent

Name \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_

Suite, Apt. #, Etc. \_\_\_\_\_

City \_\_\_\_\_ State **FL** Zip Code \_\_\_\_\_

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of Registered Agent

**SIGNATURE REQUIRED**  
REGISTERED AGENT MUST SIGN

Date 10/25/02

11. 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 my signature shall have the same legal effect as if made under oath.

**SIGNATURE:** **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/25/02

Date Daytime Phone #

**MICHAEL J. DEMARIE, CPA**  
Certified Public Accountant

Member FICPA & AICPA  
Member Private Companies Practice Section

5301 N. Federal Hwy., Suite 130  
Boca Raton, FL 33487  
(561) 989-9900 Telephone  
(561) 989-9919 Fax

October 22, 2002

Florida Department of State  
Division of Corporations  
Annual Reports Section  
P.O. Box 1500  
Tallahassee, FL 32314

Ref: Salvatore's Pizzeria, Inc.  
FEIN 59-2608358

Dear Sirs/Madam:


As we discussed with Barbara Mitchell at the Florida Department of State today, the corporate president never received a cancelled check #1072 back from the bank, even though the Annual Report was filed on time on April 25, 2002.

The taxpayer discovered that the check did not clear the bank during April of 2002, after reviewing the monthly bank statement. This was mailed certified mail April 29, 2002.


We have enclosed another check to the Department in the amount of \$150 to cover the annual filing fees, and have now signed the reinstatement form, which according to Ms. Mitchell, is the proper form to use at this point (even though the corporation was not intended to have been dissolved).

Please adjust your records. Thank you for your consideration in this matter.

Very truly yours,

  
Michael J. DeMarie, CPA

Acknowledged:

  
Salvatore Miceli, President  
Salvatore's Pizzeria, Inc.

Att.:

Copies of bank statements for April & May 2002