

**2005 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Sep 29, 2005  
Secretary of State**

DOCUMENT# M21906

Entity Name: SALVATORE'S PIZZERIA, INC.

**Current Principal Place of Business:**

271 NE 6TH AVENUE  
DELRAY BEACH, FL 334835514

**New Principal Place of Business:**

**Current Mailing Address:**

271 NE 6TH AVENUE  
DELRAY BEACH, FL 334835514

**New Mailing Address:**

FEI Number: 59-2608358      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

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

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DV      ( ) Delete  
Name: MICELI, SALVATORE  
Address: 271 ME 6TH AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: DP      ( ) Delete  
Name: MICELI, VINCENT  
Address: 271 N.E. 6TH AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VINCENT MICELI

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

09/29/2005

\_\_\_\_\_  
Date