

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N29318

1. Corporation Name

MIAMI TACO BELL RESTAURANT OWNERS ADVERTISING ASSOCIATION, INC.

FILED

02 JUL 25 PM 2:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

675 MANFELL ROAD  
SUITE 200  
ROSWELL GA 30076

675 MANFELL ROAD  
SUITE 200  
ROSWELL GA 30076

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

30342

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

11/16/1988

5. FEI Number

58-1836534

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	GAVIN, MARY	8055 SE WINDJAMMER WAY	HOBE SOUND FL 33455
VPD	ORLOS, DENNIS	32 NORTH MAIN STREET	LAKE PLACID FL 33852
TD	WYNN, LISA	675 MANFELL ROAD, SUITE 200	ROSWELL GA 30076

100006952201--8  
-08/07/02--01058--005  
\*\*\*\*297.50 \*\*\*\*297.50

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

NENKAMM, JOHN B  
KETCHY MORAN, P.A.  
100 NORTH TAMPA STREET, SUITE 1900  
TAMPA FL 33602

Name

CT Corporation System

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

1200 S. Pine Island Rd

Suite, Apt. #, Etc.

City

Plantation, FL

State

FL

Zip Code

33324

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

Dale W. Morris

DALE W. MORRIS

ASSISTANT VICE PRESIDENT

Date

5/7/02

REGISTERED AGENT MUST SIGN

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Lisa Wynn

Taco Bell

7/24/02

MPW

X3333

3/4/02

(770)990 3000

X3339

CP2E040 (8/01)