

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR REINSTATEMENT



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

APPROVED
AND
FILED

20 MAY 15 PM 1:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000003582

1. Corporation Name

ITALIAN AMERICAN POLITICAL CLUB
AND ASSOCIATES, INC.

Principal Place of Business

Mailing Address

7164 UNIVERSITY DR. P.O. BOX 25987
TAMARAC, FL 33321 TAMARAC, FL 33320

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

4. Date Incorporated or Qualified
To Do Business in Florida

7-20-94 5/15/98

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For
Not Applicable

City & State

City & State

65-0704747

Zip

Country

BROWARD

Zip

Country

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 | Angelo Mela | 7266 PAPAYA WAY | TAMARAC, FL 33321 |
| V/P | SAM SEMINZA | 2901 FIORE WAY | DELRAY Bch, FL 33445 |
| T | JOE GAUDIO | 4400 NW 30 ST. | COCONUT CREEK, FL 33066 |
| S | FRANK OURELIO | 5320 NW 11 ST. | PLANTATION, FL 33332 |
| D | DOMENICK PULEO | 17102 NW 93 AVE | TAMARAC, FL 33321 |
| D | JOHN DELEMO | 5155 SABLE PALM BLVD | TAMARAC, FL 33319 |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Angelo Mela
7266 PAPAYA WAY
TAMARAC, FL 33321

Name

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

Suite, Apt. #, Etc.

City

50000253055-9-3

05/21/98-01005-019-3

****420.00 ****420.00

FL

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

Angelo Mela

REGISTERED AGENT MUST SIGN

Date

5/13/98

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 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:

Angelo Mela

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/13/98

Daytime Phone #

(954)
791-7958

CR2E040 (1-98)