

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P00000003567

1. Corporation Name

VITA BELLA, INC.

2. Principal Office Address

10187 W. SUNRISE BLVD

Suite, Apt. #, etc.

City & State

PLANTATION, FL

Zip

33322-7617

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

4. Date Incorporated or Qualified
To Do Business in Florida

01-11-2000

5. FEI Number

650971844

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

AGOSTINO VEDDA

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

10187 W. SUNRISE BLVD.

Suite, Apt. #, Etc.

City

PLANTATION

State

FL

Zip Code

33322-7617

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11/8/01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	AGOSTINO VEDDA	10187 W. SUNRISE BLVD	PLANTATION, FL 33322
D	FRANCESCO OCCHIPINTI	10187 W. SUNRISE BLVD.	PLANTATION, FL 33322
D	GIUSEPPE VEDDA	626 TURTLE RUN	WESTON, FL 33326

10. 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)(l), 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AGOSTINO VEDDA

Date

11/8/01

Daytime Phone #

954 382 4747

FILED

01 NOV 13 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

182

CP2E081 (9/00)

WILLIAM E. ASHCRAFT LAW OFFICE, P.A.
ATTORNEY & COUNSELLOR AT LAW

282

WILLIAM E. ASHCRAFT

P.O. Box 4336
FORT LAUDERDALE, FLORIDA 33338-4336
e-mail: ashcraftlaw@usa.net
TELEPHONE (954) 561-2680
FAX (954) 561-1085

November 2, 2001

Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Corporation of Vita Bella, Inc.

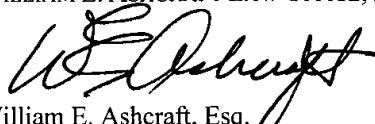
Gentlemen:

I represent Vita Bella, Inc. a dissolved Florida Corporation and the majority of the shareholders in that corporation. The corporation was formed by a minority shareholder, Guiseppe Vedda. After incorporation, shares were issued and a new board of directors including the incorporator was elected. Unfortunately Guiseppe Vedda soon withdrew from active participation in the corporation because he had personality differences with the other directors and officers. He did not communicate with them, and, if he received notices, did not forward any of the notices from your office regarding the Uniform Business Report, the required annual filing and did not file it himself. The corporation recently became aware that it had been dissolved by administrative action for failure to file the uniform business report and now requests reinstatement. Because the failure to file the report was the result of the willful concealment by the original incorporator and resident agent, the corporation requests that the department waive the penalties and accept the payment of the normal fee of \$150.00 to reinstate the corporation. A new corrected mailing address appears on the Reinstatement form.

Enclosed please find the corporation's check in the amount of \$150.00 and application for reinstatement.

If you have any questions concerning the above, please do not hesitate to contact me.

Very truly yours,
WILLIAM E. ASHCRAFT LAW OFFICE, P.A.


William E. Ashcraft, Esq.

WEA/pa

Enc: As Stated