

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1002

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris.

Secretary of State.

DIVISION OF CORPORATIONS

FILED

03 SEP 26 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *PO 000000 10391*

1. Corporation Name

EI ROMANCE RESTAURANT INC.

2. Principal Office Address

20030 N.E 21st Ave

Suite, Apt. #, etc.

City & State

MIAMI - FLA

Zip

33179

Country

U.S.A.

3. Mailing Office Address

20030 N.E 21st Ave

Suite, Apt. #, etc.

City & State

MIAMI - FLA

Zip

33142

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

20-0247094

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

Emile Francois

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

20030 N.E 21st Ave

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33179

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

X Emile Francois

REGISTERED AGENT MUST SIGN

Date

01/07/02

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
<i>P.O</i>	<i>FRANCOIS EMBLE</i>	<i>2100 N.W. 26th St. Miami</i>	<i>MIAMI - FLA 33142</i>

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)(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:

X Emile Francois

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/07/02

Date

Daytime Phone #

CR2E081 (9/01)

2012

TO: DIVISION OF CORPORATIONS.
ATT: MICHELLE MILIGAN

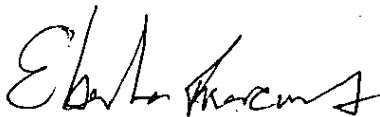
SUBJECT: VICTORIA TRADING INTERNATIONAL INC. P-00000021003
ATHEMISE INTERNATIONAL INC. P-99000068076
EL ROMANCE RESTAURANT INC P-00000010391

DEAR MICHELLE:

ENCLOSED PLEASE FIND AS REQUESTED ALL INFORMATION AND PROPER REPORTS OF THESE CORPORATIONS AS OUR PHONE CONVERSATION AND CORRESPONDENCE WITH YOUR DEPARTMENT. THE ANNUAL REPORT FOR THIS CORPORATIONS WERE RECEIVED IN AUGUST 28/2002, AFTER THAT WE HAVE BEEN TRYING TO PAY OUR ORIGINAL FEES \$150.00 WHICH HAS FAILED WITH VARIOUS CORRESPONDENCE BETWEEN US AND YOUR DEPARTMENT. ENCLOSED ALSO YOU WILL FIND COPY OF THE \$450.00 CHECK THAT WAS SUBMITTED AND APPLIED TO VICTORIA TRADING INTERNATIONAL INC ONLY PLUS OTHER \$450.00 SEND TO YOU PRIOR TO THAT ALL APPLIED TO THIS CORPORATION.

PLEASE AS DISCUSSED REDISTRIBUTE THE MONEY TO ALL THREE CORPORATIONS FOR BOTH YEARS 2002 & 2003 AND PLEASE REINSTATE THEM.
SORRY FOR ANY INCONVENIENCE THIS MAY HAVE CAUSED.

SINCERELY YOURS



EBERLE FRANCOIS