

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

01 OCT 31 PM 4:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P00000033250**

1. Corporation Name

T.N.G. PIZZA INC.

DBA: COZINS

500004695015--5

-11/27/01--01044--017

******150.00 ****150.00**

2. Principal Office Address

7220 MANATEE AVE W

Suite, Apt. #, etc.

City & State

BRADENTON, FL

Zip

34209

Country

USA

3. Mailing Office Address

705 PALMA

Suite, Apt. #, etc.

4

City & State

BRADENTON, FL 34209

Zip

34209

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

3/2000

5. FEI Number

65-1022057

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

NO \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

TERENCE SULLIVAN

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

1211 45th ST W

Suite, Apt. #, Etc.

City

BRADENTON

State

FL

Zip Code

34209

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

Date

REGISTERED AGENT MUST SIGN

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 |
|------------|--------------------------------------|---|---------------------|
| P | TERENCE SULLIVAN | 1211 45 th ST W | BRADENTON, FL 34209 |
| VP, S,T | JOHN CURRIS | 705 PALMA SOLA AVE | BRADENTON, FL 34209 |
| | | | |
| | | | |
| | | | |
| | | | |

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/22/01

Date

941 5454033

Daytime Phone #

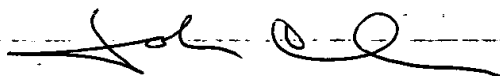
CR2E081 (9/00)

FL DEPT OF STATE
DIV OF CORPORATIONS

DEAR SIR,

PLEASE BE ADVISED THAT THE PIZZA
INC HAS NEVER RECEIVED ANYTHING FROM YOUR
OFFICE WITH REGARDS TO A "NOTICE" TO INSTATE
OUR CORPORATION. THEREFORE, WE HOPE
THAT YOU EXCEPT OUR INITIAL INSTANTMENT FEE
OF \$150.00.

THANK YOU.



JOHN O. QUINN
VP TNS

(W) 941 761 2202

(H) 941 795 3885

(C) 941 545 4033