

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 DEC -3 PM 4:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000033250

1. Corporation Name

TNG PIZZA, INC.

Principal Place of Business

7220 MANATEE AVE.  
BRADENTON FL 34209

Mailing Address

705 PALMS SOLA BLVD.  
BRANDON FL 34209

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

03/29/2000

5. FEI Number

65-1022057

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
P	SULLIVAN, TERENCE	1211 45TH ST.,W.	BRADENTON FL 34209
VST	CLARK, JOHN	705 PALMA SOLA BLVD	BRADENTON FL 34209

8. Name and Address of Current Registered Agent

SULLIVAN, TERENCE  
1211 45TH ST.,W.  
BRADENTON FL 34209

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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. or 617.0505, F.S.

Signature of  
Registered Agent

*[Signature]*  
SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date

11/26/02

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]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Pres 11/26/02 944  
761-2202

CR2E040 (8/02)

TNG PIZZA, INC.  
7220 MANATEE AVE.  
BRADENTON, FL 34209

November 26, 2002

Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

RE: Document #O33250  
FEI # 65-1022057

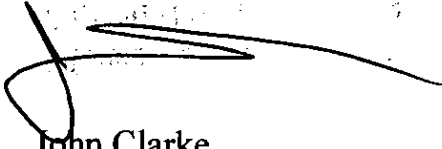
TO WHOM IT MAY CONCERN:

By notice of this letter, we did not receive the previous UBR notices due to the fact they were mailed to the wrong address. Enclosed please find our completed and signed application for reinstatement along with our check # \_\_\_\_\_ in the amount of \$150.00.

Should you have any questions, please do not hesitate to contact us at 941-761-2202.

Thank you and please note address change in Box #3.

Sincerely,



John Clarke  
Owner  
TNG Pizza, Inc.

JC/kle