

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 OCT 18 PM 6:08

DOCUMENT # P00000069756

1. Corporation Name

JOE'S FIREHOUSE GRILL, INC.

Principal Place of Business

Mailing Address

4801 ROOSEVELT STREET
HOLLYWOOD FL 33021

4801 ROOSEVELT STREET
HOLLYWOOD FL 33021

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

2. New Principal Office Address, If Applicable

2303 SW 132 WAY

3. New Mailing Office Address, If Applicable

2303 SW 132 WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DAVIE FL

City & State

DAVIE, FL

Zip

33325

Country

BROWARD

Zip

33325

Country

BROWARD

REINSTATEMENT

01

4. Date Incorporated or Qualified
To Do Business in Florida

07/21/2000

SP

5. FEI Number

651029028

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
1	2	3	4
D	BERTUGLIA, JOSEPH	4801 ROOSEVELT STREET	HOLLYWOOD FL 33021
PLD	BERTUGLIA, JOSEPH	2303 SW 132 WAY	DAVIE FL 33325

200004664032-0
-11/02/01-01035-002
****750.00 ****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BERTUGLIA, JOSEPH
4801 ROOSEVELT STREET
HOLLYWOOD FL 33021

Name
JOSEPH BERTUGLIA
Street Address (P.O. Box Number is Not Acceptable)
2303 SW 132 WAY
Suite, Apt. #, Etc.

City
DAVIE

State
FL

Zip Code
33325

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

Joseph Bertuglia
REGISTERED AGENT MUST SIGN

Date 10/15/01

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:

Joseph Bertuglia
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(954) 205-9683

CR2E040 (8/01)