

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1042

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JUN 22 AM 8:29

DOCUMENT # P01000067871

1. Corporation Name

THE LANDINGS CAFE INC.

**REINSTATEMENT** 02-05

2. Principal Office Address

546 TERMINAL DR

Suite, Apt. #, etc.

3. Mailing Office Address

546 TERMINAL DR

Suite, Apt. #, etc.

City & State

NAPLES, FL

City & State

NAPLES FL

Zip

34104

Country

USA

Zip

34104

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5/10/01

5. FEI Number

59-373-4659

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$3.75 Additional Fee required  
for a Certificate of Status

07/23/04 90005 018 15020

**7. Name and Address of Current Registered Agent**

Name

RON KLEIN

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

260 EDGEWATER WAY EAST

Suite, Apt. #, Etc.

City

NAPLES

State  
FL

Zip Code

34105

10005544001

06/22/05--01060--001 \*\*450.00

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

[Signature]

Date

6/18/05

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
PRES	RON KLEIN	260 EDGEWATER WAY E.	NAPLES, FL 34105
D	ARLENE KLEIN	260 EDGEWATER WAY E	NAPLES FL 34105
D	STACEY KLEIN	PO Box 7535	AVON CO. 81620

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:

RON KLEIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/18/05 239-262-0019

Daytime Phone #

CR25081 (01/05)

2 of 2

June 21. 2005  
Department Of Corporations  
PO Box 6327  
Tallahassee, FL  
32314

As per my conversation with your representative I am enclosing a check for  
\$ 450.00 for reinstatement of The Landings Café Inc.

I did not receive any correspondence regarding the renewal for our  
Corporation, If I received it I would have returned it immediately.

Thank you

Ron  
Klein  
Pres.

A handwritten signature in black ink, appearing to read 'Ron Klein', followed by a horizontal line.