

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

112

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

~~Matthew Harris~~
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 OCT 29 AM 8:01

DOCUMENT # P01000076472

1. Corporation Name

BUONA PIZZA, CORP.

2. Principal Office Address

2203 NORTH CONNENCE Pkwy / 1070 TUPELO WAY

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

WESTON, FLORIDA

City & State

WESTON, FLORIDA

Zip

33326

Country

U.S.A.

Zip

33327

Country

U.S.A.

**4. Date Incorporated or Qualified
To Do Business in Florida**

08/03/2001

5. FEI Number

30-0118458

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

DANIEL LAVIOSA

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

555 NE 15 ST.

Suite, Apt. #, Etc.

16-D

City

MIAMI

State

FL

Zip Code

33132

600008644176
10/29/02--01036--003 **150.00

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

REGISTERED AGENT MUST SIGN

Date

10/22/2002

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
D	DANIEL LAVIOSA	555 NE 15 ST. #16-D	MIAMI, FL 33132
D	ALEXANDER HILLER	1070 TUPELO WAY	WESTON, FL 33327

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/22/2002

Date

(796)402-8961

Daytime Phone #

CR2E081 (9/01)

Miami, October 24, 2002

Division of Corporations

The reason of this letter is to state that we didn't pay any fee in relation to our corporation because we never received the form to send the fee (\$ 150.00). further more this company (BUONA PIZZA, CORP.) will start operations on December 2002, because we were working in getting the permits in order to build restaurant location.

We will appreciate your understanding in this matter,

Thanks again,


Daniel Laviosa