

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 MAY -9 AM 11:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # PD/000106832

1. Corporation Name

BUFFETT AND BEYOND, INC.

2. Principal Office Address

5572 N. Ocean Blvd

Suite, Apt. #, etc.

City & State

Ocean Ridge, FL

Zip

33435

Country

USA

3. Mailing Office Address

5572 N. Ocean Blvd

Suite, Apt. #, etc.

City & State

Ocean Ridge, FL

Zip

33435

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

11/5/01

5. FEI Number

04-3590505

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

Joseph Belmonte

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

5572 N. Ocean Blvd.

Suite, Apt. #, Etc.

City

Ocean Ridge

State

FL

Zip Code

33435

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

Joseph Belmonte

Date

4/28/03

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	<u>Joseph Belmonte</u>	<u>5572 N. Ocean Blvd</u>	<u>Ocean Ridge FL</u> <u>33435</u>

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:

Joseph Belmonte

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/28/03

Daytime Phone #

561-738-4873

CR2ED81 (10/02)

91 519

**Joseph Belmonte**

5572 North Ocean Blvd.

Ocean Ridge, Florida 33435

Ph. 561-738-4873 Fax: 561-737-4190 E-Mail jbwallst@bellsouth.net

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Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

April 28, 2003

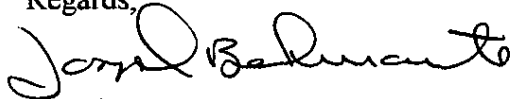
RE: Reinstatement of **Buffett and Beyond, Inc.**

I am requesting a waiver of the late fee for reinstatement re my phone call to the Division of Corporations today. I have not received any notices nor the Uniform Business Report for the year 2002.

I am enclosing a check made out to the Department of State for \$300 as requested by the Division of Corporations by phone on this date.

If you have any questions, please don't hesitate to contact me at the phone or address on the top of this stationery.

Regards,



Joseph Belmonte

Owner of Buffett and Beyond, Inc.

check # 1027 for \$300.00