

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # P02000000969

1. Corporation Name

EXPRESS LANE FOOD STORES, INC.

Principal Place of Business

Mailing Address

~~PO BOX 273329~~
~~TAMPA FL 33688~~

~~PO BOX 273329~~
~~TAMPA FL 33688~~

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

2. New Principal Office Address, If Applicable

7870 South Florida Ave
Suite, Apt. #, etc.
FLORAL CITY FL
City & State

3. New Mailing Office Address, If Applicable

P.O. Box 327
Suite, Apt. #, etc.
FLORAL CITY FL
City & State

Zip
34436

Country

Zip
34436

Country

4. Date Incorporated or Qualified To Do Business in Florida

01/03/2002

5. FEI Number

26-0002194

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	FERRO, DAVID H	PO BOX 273329	TAMPA FL 33688

300023871213

10/17/03--01024--007 **158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FERRO, DAVID H
3618 HAYSTACK RD
WESLEY CHAPEL FL 33543

Name

DAVID H. FERRO

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

13394 BOLTON COURT

Suite, Apt. #, Etc.

Spring Hill

City

Spring Hill

State

Zip Code

FL

34609

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

DAVID H. FERRO

Date **10-14-03**

REGISTERED AGENT MUST SIGN

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:

DAVID H. FERRO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-14-03

Date

Daytime Phone #

352 341-1335



REINSTATEMENT

03

FILED

03 OCT 17 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E040 (7/03)

October 14, 2003

Florida Department Of State
Glenda E. Hood
Secretary Of State
Division Of Corporations

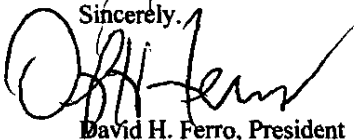
Express Lane Food Stores, Inc.
David H. Ferro, President
P. O. Box 327
Floral City, FL 34436

To Whom It May Concern,

Today October 14, 2003 was the first time I recieved a notice concerning the "Corporate Annual Report". I,m new to Florida and I was not aware of such report. I apoligize for my ignorance in this matter. Also unfortunately the address I used initially was my brothers business P.O. Box which he allowed me to use but if he received mail for me from you he did not forward it to me. Again I state to you today is the first time I,ve received anything from you. I,ve enclosed the envelope from my brother which contained the notice

from you (hopefully as further proof that I,m being honest with you concerning these facts). Enclosed is the "Application for Reinstatement" and the annual fee of \$150.00. I would ask you to please waive the reinstatement fee in this matter. Thank you for your time and consideration in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "D. H. Ferro", written over the word "Sincerely,".

David H. Ferro, President