P04000029157

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 MAR 30 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000029157

1. Corporation Name

ROCK 'N' ROLL PIZZA, INC.

REINSTATEMENT 03-04

2. Principal Office Address	**3.** Mailing Office Address
9850-9 SAN JOSE Blvd	9850-9 SAN JOSE' Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville, Florida	City & State: Jacksonville, Florida
Zip: 32257 Country: DUVAL	Zip: 32257 Country: DUVAL

4. Date Incorporated or Qualified To Do Business in Florida: 03/18/2002

5. FEI Number: 010635258 — Applied For ☐ Not Applicable ☑

6. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: CHRISTOPHER L. THOMAS

Street Address (P.O. Box Number is Not Acceptable): 9850-9 SAN JOSE' BLVD.

Suite, Apt. #, Etc.: ✓

City: JACKSONVILLE | State: FL | Zip Code: 32257

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: Christopher L. Thomas — Date: 03/22/04

REGISTERED AGENT MUST SIGN

CR2E081 (01/04)

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	CHRISTOPHER L. THOMAS	9802 WOODRIDGE LANE	JAX/FL/32257
D	LISA WAGNER-THOMAS	2537 FORBES STREET	JAX/FL/32204

600031366806
03/30/04--01012--013 **300.00

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: Christopher L. Thomas — CHRISTOPHER L. THOMAS — March 22, 2004 — 904-262-9889

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

To Whom It May Concern, Pg 2 of 2

I am asking for a waiver of the additional $600.00 ($900.00) filing fee, due to the fact, I Christopher L. Thomas never received the proper documentation to file accordingly. For whatever reason my sister Lisa Wynn-Thomas (Managing Partner/Onieta) decided to be negligent with this matter, & my fund out recently of this due to her losing the business. I would appreciate you deleting the 600.00, accepting the 300.00 and remitting my corporate. Thank you.

Sincerely,

(904-262-9709.)