

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

FILED

03 OCT 28 PM 1:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000049977

1. Corporation Name

LANCIANI OF BOCA RATON, INC.

Principal Place of Business

Mailing Address

TOWN CENTER, 6000 W. GLADES RD., #1232  
BOCA RATON FL 33431

~~TOWN CENTER, 6000 W. GLADES RD., #1232~~  
~~BOCA RATON FL 33431~~

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

38 EAST 57TH STREET

10TH FLOOR

NEW YORK, NY

10022 U.S.A.

4. Date Incorporated or Qualified  
To Do Business in Florida

05/07/2002

5. FEI Number

03-0461191

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<br>Title(s) | 2<br>Name of Officers<br>and/or Directors | 3<br>Street Address of Each<br>Officer and/or Director | 4<br>City / State / Zip |
|---------------|---|--|-------------------------|
| S/T/D         | GIANFRANCO IAVARONE                       | 341 ORIENTA AVENUE                                     | MAMARONECK, NY 10543    |
| P/D           | RITA IAVARONE                             | 341 ORIENTA AVENUE                                     | MAMARONECK, NY 10543    |
|               |   |  |                         |
|               |   |  |                         |
|               |   |  |                         |
|               |   |  |                         |
|               |   |  |                         |

300024187853  
10/28/03--01013--002 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

IAVARONE, RICCARDO  
C/O LANCIANI  
TOWN CENTER, 6000 W. GLADES RD., #1232  
BOCA RATON FL 33431

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

REGISTERED AGENT MUST SIGN

Date

10/15/03

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:

*Gianfranco Iavarone*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SEC. & TREAS.

10-15-03

Date

(212) 888-3444

Daytime Phone #

CR20040 (7/03)



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

October 15, 2003

RE: "Application for Reinstatement"  
For: Lanciani of Boca Raton, Inc.  
Document #: P02000049977

To Whom It May Concern:

We received the "Certificate of Dissolution or Revocation" at our store location, but we had never received the "Annual Report/Uniform Business Report" form. This was first year in business for this Corporation and we were not aware of this required filing and its due date. Based on these facts, please waive the reinstatement fee.

We have enclosed our "Application for Reinstatement" and a check for the annual fees of \$ 150.00. As noted in the Application, please change the mailing address for all future forms and notices to our NY office: 38 East 57<sup>th</sup> Street, New York, NY 10022. This will ensure that we receive all necessary forms so that we can file them in a timely manner.

Thank you for your assistance in this matter.

Sincerely yours,

Gianfranco Iavarone,  
Secretary and Treasurer