

12/30/03

16:03

SRDANZIGER → 3052616719

NO. 048

10/2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 JAN -5 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 02000066640

1. Corporation Name

PALM BEACH CHICKEN GRILL, INC.

2. Principal Office Address

8434 SW 200th Terrace

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33189

Country

Miami-Dade

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

✓ Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$8.75 Additional Fee required
for a Certificate of Status

07-07-03 90136 022 \$550.00

7. Name and Address of Current Registered Agent

Name

FRANKLIN ROIG

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

8434 SW 200th Terrace

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33189

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

Date

12-30-03

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
PD	FRANKLIN ROIG	8434 SW 200th Terrace	Miami, FL 33189
STD	ANTHONY DEPASQUALE	8434 SW 200th Terrace	Miami, FL 33189

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

Date

Daytime Phone #

12-30-03 (305) 987-9202

CR2001 (10/02)

12/30/03

16:04

SRDANZIGER → 3052616719

NO. 048

20672

PALM BEACH CHICKEN GRILL, INC.


8434 SW 200th Terrace
Miami, Florida 33189

December 30th, 2003

Florida Department of State
Corporation Reinstatement
Florida Department of State
Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Gentlemen:

In regard to attached check, be advised I never received reinstatement form from your office in July and request additional reinstatement fee be waived.


FRANKLIN ROIG
Resident Agent
President, Director
PALM BEACH CHICKEN GRILL, INC.