PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Katherine Harris FOR FILED Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS P94000069060 99 KOV 23 AM ID: 21 DOCUMENT # 1. Corporation Name SECRE STATE TALLAHASSEL FLORIDA TOMASSO'S, INC. Principal Place of Business Mailing Address 1818 US HWY 19 1818 US HWY 19 HOLIDAY FL 34691 HOLIDAY FL 34691 US 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 Date incorporated or Qualified To Do Business in Florida 09/20/1994 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For 59-3268791 City & State City & State Not Applicable 6. Zip \$8.75. Add troud Fee require CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Title(s) City / State / Zlp Æ BRUMAGE, VIRGINIA 3310 CRENSHAW LAKE RD **LUTZ FL 33549** V.D BALTAJI, AHMAD 5310 CRENSHAW LAKE RD LUIZ FL 33549 1639 DANDER DRIVE HOLIDAY, 34690 400003065974--12/10/99--01004--004 \*\*\*\*150.00 - \*\*\*\*150.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent BRUMAGE, VIRGINIA 3310 CRENSHAW LAKE RD **LUTZ FL 33549** State Zio Code FL 34690 HOL/DAY 10. I, being appointed the registered/agent of the above name Signature of Registered Agent 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 filling 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 path. AHAMAD BALTAJI / 19-99 (727)-948 NATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICE OR DIRECTOR SIGNATURE:

0085217

## LEWIS H. HEIDENRICH ACCOUNTING - INCOME TAX

November 19, 1999

Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, FL 32314-6327 2

To Whom It May Concern:

A ...

RE: Tomasso's, Inc. 1818 US Highway 19 Holiday, FL 34691-5535 Document # - P94000069060

We are requesting an abatement of the \$ 600 penalty for late filing of the corporation annual report. The registered agent, Virginia Brumage, told us that she mailed and paid it in May of 1999. We know that she sent it because we do not have the original form in our office, and the office files are always well kept. I am the accountant for the corporation, and I should have contacted you earlier; however, my wife has been in the hospital several times this year and the past year. This has caused me to get behind at times, and I apologize for that. I went through the cancelled checks, and I can not find a check that was made for the annual report. I do know from past experience that Virginia will pay a bill by money order at times. Therefore, due to the above circumstances, we are asking that the penalty be waived. Also, we are changing the position of registered agent to the corporation president, Ahmad Baltaji. Virginia has been on leave for personal reasons since June of this year. Thank you for your understanding.

Sincerely,

Lewis H. Heidenrich

Accountant