PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

APPROVED AND FILED

1996 NOV -6 PM 3: 45

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P95000041512

1. Corporation Name

DELLA'S FLOWERS, INC.

Principal Place of Business

Mailing Address

HERE CODAL WAY 4TH FLOOR

-1878-CORAL WAY -FRH-FLOOR

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	ddresses are incorrect in any way, line	through incorrect informatio	in and enter correction below	w. # # # # # #	rivirile!	1000	
2. New Prin	ncipal Office Address, If Applicable	3. New Mailing Office	Address, If Applicable		porated or Qualified		
3296	Palm Avenue		.m Avenue	To Do Bus		28/1995	
Suite, Apt.		Suite, Apt. #, etc.	THE PERSONS	<u>-</u>	- Calcal (septiment)		
				5. FEI Numbe	or .	Applied For	
City & State)	City & State		65-	0373342		
Hialo	eah, Florida	Hialeah,	Florida		<u> </u>	Not Applicable	
Zip	Country	Zip	Country	6,		A 2	
33012	2 -	33012	,	CERTIFICAT	TE OF STATUS DESIRED 🔲		
			1				
7. Names a	and Street Addresses of Each Officer ar	nd/or Director (Florida nonp					
Title(s)	Name of Officers and/or Directors		Street Address of	Each			
1	and/or Directors	3	Officer and/or Direction (Do NOT Use Post Office E	ector 3nx Numbers)	City / State	ı / Zip	
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D	ALBERTO, MARIA	3295	PALM AVE		HIALEAH FL 33012		
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8. Name and Address of Current Registered Agent				9. Name and	Address of New Registered Ac	ent Circ. Is at the shock of	
			Name _			12 - 1481 street (1925)	
0007	CO ORVAIDO D		A.	lberto, Mar:	ia		
OROZCO, OSVALDO R			Street Aridos	ss (P.O. Box Number	r is Not Acceptable)	zeti indi kaj ingledigi Gerita, kiri z nastroni indiana kiri indiana kiri indiana kiri in	
1378 CORAL WAY			296 Palm Av				
ATH F	ROOR .		Suite, Apt. #		SIME	A CONTRACTOR	
			Suite, Apt. V	, Etc.	and the second		
MAM	I FL 33145		Olav		25.00	· · · · · · · · · · · · · · · · · · ·	
			City	ialeah	State.	33612	
10 l balaa				<i></i> ;		330 (Z	
io. I, being	appointed the registered agent of the a	bove named corporation, ar	m tamillar with and accept t	ne obligations of Sect	ion 607.0505, F.S.	多一个个情况的	
Signature of		VI DE MI		· λ	11 7	-01	
Registered A	Agent	My College		٠٠٩	Date 1 Z		
•	/	REGISTERED AGENT MUS	ST SIGN			25年20日的最初50日日	
4.4					The state of the state of	The section of the machines of	
11. Do	es this corporation pay	any intangible t	ax to the		- (See other side f		
Der	pt. of Revenue under S	199 032 Florid	da Statutos V	es 🔲 No 🗀	on intangii	ble tax.)	
	pur di l'idvellad allaci e	7. 100.00L, 1 1011c	ad Claidles. 16	35 🗀 140 📖	<u> </u>	TO COMPANY PROCESS	
			1			生物學學就得得	
12. I certify t	that I am an officer or director or the rec	elver or trustee empowered	I to execute this application	as provided for in cha	apler 607 or 617, F.S. I further ce	ntify 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.

SIGNATI	URE
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Sollowal	y or Bighing OfFicen on DIRECTOR
SIGNATURE AND TYPED OR PRINTED HAN	of Bighting Officer on Director

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