PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Jim Smith **FOR**

Secretary of State

DOCUMENT #

P95000082237

1. Corporation Name

REINSTATEM

FREDS ULTIMA CAFE, INC.

Principal Place of Business

Mailing Address

400 CLEMATIS ST.

WEST PALM BEACH FL 33401

400 CLEMATIS ST.

WEST PALM BEACH FL 33401

FILED

02 NOV 13 PM 3: 34

SECRETARY OF STATE TALLAHASSEE FLORIDA



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If above addresses are incorrect in any way, line through incorrect in 2. New Principal Office Address, If Applicable 3. New Mail				ling Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 10/26/1995 5. FEI Number			
Suite, Apt. #, etc. Suite, Apt. #,									
City & State City & State						J. TETTALINDE	65-0621649 Applied For Not Applied		
Zip Country Zip		Zip	Country		CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status		Additional Fee required		
7. Names	and Street Add	dresses of Each Officer an	id/or Director (Flo	rida nonprofit co	rporations must list at I	least 3 directors)			
Title(s)	Name of Officers and/or Directors			Street Address of Eac Officer and/or Director					
Р	YORLOFF,	YORLOFF, FRED 6287 WINDLA			ASS CR.	CR. BOYNTON BEACH FL 33437			
٧	YORLOFF, JOANNE			6287 WINDL	ASS CR.	· · · · · · · · · · · · · · · · · · ·	BOYNTON BEACH FL 33437		
					,	00a 117137	DOO894774 D201016008 **	*150.00	
8. Name and Address of Current Registered Agent						Name and Address of New Registered Agent			
YORLOFF, FRED JR. 400 CLEMATIS ST. WEST PALM BEACH FL 33401					Street Address	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code			
10. 1, being	appointed the	registered agent of the at	bove named corpo	pration, am familia	ar with and accept the	obligations of Secti	on 607.0505, F.S. or 617.0505,	F.S.	
Signature of Registered Agent SIGNATURE REQUIRED REGISTERED AGENT MUST SIGN Date									
11. I certify this reins	that I am an of statement appl	ficer or director or the reci	eiver or trustee em solution has been	npowered to exec eliminated, the c	cute this application as orporate name satisfie	provided for in cha s the requirements	pter 607 or 617, F.S. I further ce of section 607.0401 or 617.0401	rtify that when filing	

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.

10-25-02

Subj: (no subject)

Date: 10/26/2002 6:29:17 PM Eastern Daylight Time

From: <u>JYorloff711</u>
To: <u>JYorloff711</u>

Oct 25, 2002

To the Division of Corporations:

I received in the mail today a notification that the corporation Fred's Ultima Café has been dissolved as a result of nonpayment of the annual fee. I just got off the phone with Carol and she informed me that it is true that you never received the annual report and payment. As you can see the same thing happened last year and we sent you a similar letter of explanation. I can not explain why except that I never received the form that you mailed. I don't know what happened to it only that the same thing happened last year. I am sending you a check for 150.00 with the annual report hoping you will accept this apology for noncompliance and I will contact the post office to investigate what may have happened to the letter. I have marked my calendar for next year, Feb 1, 2003, and if I have not received the annual report bill I will contact your office.

Thank you

Joanne Yorloff Vice President Freds Ultima Café FEI Number 65-0621649