

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Sandra B. Joffe
Secretary of State
DIVISION OF CORPORATIONS

99 APR 26 PM 1:51

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DOCUMENT # P 960 001 02391

1 Corporation Name

DALE ENTERPRISES INC.

Principal Place of Business

Mailing Address

2442 UNIVERSITY BLVD

CORAL SPRINGS FL 33065

900002859439--9

-04/30/99-01143-013

****300.00 ****300.00

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

4 Date Incorporated or Qualified To Do Business in Florida

5 FEI Number

65-0718967

App. Fee

How Adjusted

6 CERTIFICATE OF STATUS DES REC ☐

\$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 Titles	2 Name of Officers and or Directors	3 Street Address of Each Officer and or Director (Do NOT Use Post Office Box Numbers)	4 City, State Zip
PRES	JANET WENOT	2442 UNIVERSITY BLVD	CORAL SPRINGS FL 33065
VP	WIMMA WENOT	2442 UNIVERSITY BLVD	CORAL SPRINGS FL 33065

8 Name and Address of Current Registered Agent

JANET WENOT
2442 UNIVERSITY BLVD
CORAL SPRINGS FL 33065

9 Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10 I, being appointed registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Janet L. Wenot

REGISTERED AGENT MUST SIGN

Date

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information on intangible tax.)

12 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

Janet L. Wenot

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

954-395-7166

(2)

Reli Enterprises, Inc
P96000102391

Corporation Department

I deeply appreciate the cooperation and advice received from your office personnel recently, regarding the ~~un~~^{un}expected forfeiture of our small restaurant corporation. The forfeiture was caused solely by our former accountants' failure and neglect to prepare an annual report, which my wife and I now understand is required by Florida law. The accountant has been fired. Your notice must have been forwarded to a corporation in Ft. Lauderdale, by the name of "Fulings, Inc", apparently retained by our former accountant.

The \$600.00 forfeiture penalty will cause a terrible financial burden on me and my wife, as I am retired on social security and our restaurant has yet to break even financially.

(5)

At the suggestion of a member of your staff, we have enclosed a check for annual corporate fees, less the \$600.00 penalty, with the hope that your office can find sufficient reasons in this letter to grant a penalty waiver to us this one time.

I personally assure you my wife and I will not permit this to happen next year. We have hired a competent C.P.A. who also is informed of ^{the} problem.

Will you please give consideration to our request for penalty waiver?

Thank you.

Bill Bender