

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT -4 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000015128

1. Corporation Name

TASTY DELIGHT CORPORATION

Principal Place of Business

4847 East 10th Court
Hialeah FL 33013

Mailing Address

4847 East 10 Court
Hialeah FL 33013

500008281325--9
-10/09/02--01026--004
****450.00 ****450.00

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

02-14-1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number 65-0767810

Applied For

City & State

City & State

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$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 Title(s)	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
DPT	MARISELA LORENZO	17382 SW 21 Court	Miramar Florida 33029
DVPS	MARIA C. ESCOBAR	1630 Biarritz Drive	Miami Beach Florida 33141

8. Name and Address of Current Registered Agent

DORTA, ALCIDES
201 West 65th Street #103
Hialeah FL 33013

9. Name and Address of New Registered Agent

Name

MARISELA LORENZO

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

4847 East 10th Court

Suite, Apt. #, Etc.

City

Hialeah

State
FL

Zip Code
33013

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

Signature of
Registered Agent

MARISELA LORENZO

Date 5/24/2002

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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:

MARISELA LORENZO

5/24/2002 (305) 362-9139

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (12/96)

TASTY DELIGHT CORPORATION
4847 East 10th Court
Hialeah Florida 33013

Re.: Document #P97000015128.

August 2, 2002.

SECRETARY OF STATE
DIVISION OF CORPORATIONS
REINSTATEMENT SECTION
Tallahassee Florida

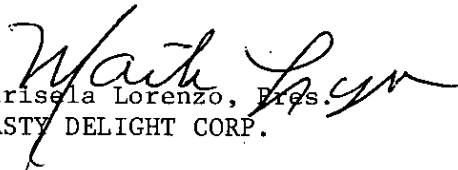
Gentlemen:

Find enclosed Reinstatement for the above mentioned company, as well as a check #3036 for the amount of \$450.00 for reinstatement fee.

I want to inform, that I never received the Annual Report Form, and I had no knowledge of this situation, this is the reason I am requesting to be waived in penalties, this is the first time I am organized with a corporation, but this situation never will happen to me again.

I thank you for the attention given to my petition.

Sincerely yours,


Marisela Lorenzo, Pres.
TASTY DELIGHT CORP.