

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Burrito Express Corporation

Principal Place of Business

Mailing Address

1900 Land O' Lakes Blvd No. 113-263  
Lutz, Florida 33549

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

n/a

3. New Mailing Office Address, If Applicable

n/a

Suite, Apt. #, etc.

n/a

Suite, Apt. #, etc.

n/a

City & State

n/a

City & State

n/a

Zip

n/a

Country

n/a

Zip

n/a

Country

n/a

4. Date Incorporated or Qualified  
To Do Business in Florida

03-24-97

5. FEI Number

59-343,7956

Applied For

Not Applicable

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)

| Title(s)<br>1 | Name of Officers<br>and/or Directors<br>2 | Street Address of Each<br>Officer and/or Director<br>(Do NOT Use Post Office Box Numbers)<br>3 | City / State / Zip<br>4 |
|---------------|---|--|-------------------------|
| P             | Tom Maroulis                              | 1900 Land O' Lakes Blvd<br>No. 113-263   | Lutz, Florida 33549     |
| T/S           | Deanna Maroulis                           | Same   | Same                    |
|               |   |  |                         |
|               |   |  |                         |
|               |   |  |                         |
|               |   |  |                         |
|               |   |  |                         |

8. Name and Address of Current Registered Agent

Tom Maroulis  
1900 Land O' Lakes Blvd No. 113-263  
Lutz, Florida 33549

9. Name and Address of New Registered Agent

Name

n/a

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

n/a

Suite, Apt. #, Etc.

n/a

City

n/a

State  
FL

Zip Code  
n/a

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

Tom Maroulis, President  
REGISTERED AGENT MUST SIGN

Date 12/28/98

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:

Tom Maroulis, President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/28/98 (813) 891-3833  
Date Daytime Phone #

FILED

98 DEC 30 AM 8:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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-01/05/99--01071--014

\*\*\*\*250.00 \*\*\*\*250.00

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-01/05/99--01071--013

\*\*\*\*250.00 \*\*\*\*250.00

REINSTATEMENT

12.12/31/98

CR26340 (1/98)