

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 NOV 21 AM 8:01

DOCUMENT # P97000106268

1. Corporation Name

DANIELLI VENICE, INC.

Principal Place of Business

4340 GULF SHORE BOULEVARD, NORTH
NAPLES FL 34103

Mailing Address

4340 GULF SHORE BOULEVARD, NORTH
NAPLES FL 34103



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

2. New Principal Office Address, If Applicable

1247 Egrets Landing Drive
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

1247 Egrets Landing Drive
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

12/16/1997

5. FEI Number

59-3483183

Applied For

Not Applicable

City & State
Naples, FL

City & State
Naples, FL

Zip Country

34108 USA

Zip Country

34108 USA

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	DANIELS, LYNN	4340 GULF SHORE BLVD, N 1247 Egrets Landing Dr.	NAPLES FL 34103 Naples, FL 34108
			100009127081 11/21/02--01011--010 **150.00

8. Name and Address of Current Registered Agent

LOTTE, KEVIN R ESQ.
GOODLETTE, COLEMAN & JOHNSON, P.A.
4001 TAMiami TRAIL NORTH, STE. 300
NAPLES FL 34103

9. Name and Address of New Registered Agent

Name

Kevin R. Lottes, Esq.

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

5801 Pelican Bay Blvd, Suite 300

Suite, Apt. #, Etc.

City

Naples,

State

FL

Zip Code

34108

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
President and Director
11/6/02 941-514-4517
Daytime Phone #

CR2ED40 (8/02)

November 1, 2000

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

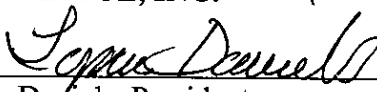
RE: Danielli Venice, Inc.

Dear Sirs:

In October 2002, I learned from the Florida Department of State that the corporation of which I am President, Danielli Venice, Inc., was administratively dissolved by the Florida Department of State for failure to timely file its 2002 Uniform Business Report; however, I never received the Uniform Business Report Form which the Department of State apparently was to have mailed to me. As a result, I was unable to file a Uniform Business Report because I never received the 2002 Uniform Business Report form. I hereby request, that as a result of my not receiving the Annual Report form, that the reinstatement fees and penalties relative to the corporation be waived.

DANIELLI VENICE, INC.

By:


Lynn Daniels, President