

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 NOV 15 PM 12:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000004322**

1. Corporation Name

DINEX CORP

2. Principal Office Address

847 NW 119 ST

3. Mailing Office Address

847 NW 119 ST

Suite, Apt. #, etc.

STE # 205

Suite, Apt. #, etc.

205

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33168

Country

Zip

33168

Country

US

4. Date Incorporated or Qualified
To Do Business In Florida

01/14/1998

5. FEI Number 65-0805066

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

RINALDO GOZZI JR.

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

847 NW 119 ST

Suite, Apt. #, Etc.

205

City

MIAMI

State
FL

Zip Code

33168

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11/10/05

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	RINALDO GOZZI JR.	847 NW 119 ST STE# 205	MIAMI, FL 33168
V-P	OSCAR CUCURULLO	201 NW 7ST STE#. 102	MIAMI, FL 33136

10. 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)(f), 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

Date

11/10/05

Daytime Phone #

305-685-5918

CR2E081 (01/05)

DINEX CORP

847 NW 119 ST STE# 205
MIAMI, FL 33168
Tel: 305-685-5918
Fax: 305-685-38

November 10, 2005

Florida Department of State
Corporation Reinstatement

Re: DINEX CORP
Doc# P98000004322

To Whom it May Concern:

Please be advised that the above mentioned company has been inactive since 2001 which we yet have not received any notice. However, we decided to continue doing business with this company. Therefore, we are kindly sending the payment for the reinstatement of \$ 600.00 as we have spoken by telephone on 11/09/05.

For further info please contact us at the above telephone and address.

Sincerely,


Rinaldo Gozzi Jr.
President