

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

182

FILED

03 OCT 21 AM 9:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P99000019186**

1. Corporation Name

TED FOOD SERVICES INC.

Principal Place of Business

Mailing Address

**218 COMMERCIAL BLVD.
LAUDERDALE BY THE SEA FL 33308**

**218 COMMERCIAL BLVD.
LAUDERDALE BY THE SEA FL 33308**



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

02/25/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0907049

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	4 City / State / Zip
PD	TEDESCO, JULIE	5810 NE 20 AVE	FORT LAUDERDALE FL 33

000023970240
10/21/03--01062--007 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**TEDESCO, ALBERT
5810 NE 20 AVE
FORT LAUDERDALE FL 33308**

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

REGISTERED AGENT MUST SIGN

Date **10-14-03.**

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:

Julie Tedesco
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-14-03 954-928-0499
Date Daytime Phone #

CR2E040 (7/03)

272

October 14th 2003

Dear Sir/madam,

I enclose a cheque for \$150.00
to reinstate the corporation; Ted Food Services Inc.

The first notice I received was the Notice of
Dissolution on October 9th 2003. I have since
visited the website to register for your notification
System for 2004. I apologise for any delay
in filing.

Yours Sincerely

Julie Tedesco