

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 OCT 21 PM 12:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P990000 78522

1. Corporation Name

60 Watt, Inc

2. Principal Office Address

1602 E. Brandon Blvd  
Suite, Apt. #, etc.

3. Mailing Office Address

1602 E Brandon Blvd  
Suite, Apt. #, etc.

City & State

Brandon FL

City & State

Brandon FL

Zip

33511

Country

USA

Zip

33511

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

8-99

5. FEI Number

59-3596886

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

Darren Cifelli

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

201 Clemmons Rd

Suite, Apt. #, Etc.

City

Brandon

State  
FL

Zip Code  
33511

2000008487032--6

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\*\*\*\*150.00 \*\*\*150.00

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

Darren Cifelli

REGISTERED AGENT MUST SIGN

Date 10/14/02

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	Darren Cifelli	201 Clemmons Rd	Brandon, FL 33511
VP	Darren Cifelli	201 Clemmons Rd	Brandon, FL 33511
T	Darren Cifelli	201 Clemmons Rd	Brandon FL 33511
S	Darren Cifelli	201 Clemmons Rd	Brandon FL 33511

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)(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:

Darren Cifelli  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/14/02

Daytime Phone #

813-681-9000

CR2ED01 (9/01)

7/10/23/02



60 WATT DANCE CLUB  
1602 E BRANDON BLVD  
VALRICO, FL 33594

TEL 813-681-9000  
FAX 813-685-4881

10-17-02

TO: FLORIDA Dept. of State

RE: Address change

We have not moved or changed our location but The Post Office has changed our city & zip code. For this reason we did not receive our Corporation renewal papers.

Owner &  
Registered agent Dan R. Bell