

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 JUN -3 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-06/13/02--01067--017

****450.00 ****450.00

DOCUMENT # P99000099572

1. Corporation Name

Maranosca's, Inc.

2. Principal Office Address

4674 Dyer Blvd
Suite, Apt. #, etc.

3. Mailing Office Address

4674 Dyer Blvd.
Suite, Apt. #, etc.

City & State

West Palm Beach

City & State

West Palm Beach

Zip

33407 USA

Zip

33407 USA

4. Date Incorporated or Qualified
To Do Business in Florida

11/10/99

5. FEI Number

65-0959541

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

Leticia A. Ramos

361.25 - AR

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

4674 Dyer Blvd.

10.00 - AR ARTS

Suite, Apt. #, Etc.

88.75 - AR SUPP

City

West Palm Beach

State

FL

Zip Code

33407

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

Leticia Ramos
REGISTERED AGENT MUST SIGN

Date May 30, 2002

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
Pres.	Leticia A. Ramos	4674 Dyer Blvd.	West Palm Beach, FL 33407
Vice-Pres.	Jose J. Ramos	4674 Dyer Blvd.	West Palm Beach, FL 33407

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:

Leticia Ramos
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 30, 2002 (501)
863-7818
Date Daytime Phone #

May 15, 2002

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

Re: Maranosca's Inc.
Document # P99000099572

To Whom It May Concern:

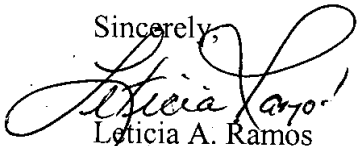
Per the instructions of your office representative, I am forwarding my completed reinstatement application for my corporation referenced above. I have never received the Uniform Business Reports and was not aware that these needed to be filed until my accountant brought this to my attention this year.

I am enclosing a check in the amount of \$450.00 in payment of the annual report and corporate supplemental fees for the years of 2000, 2001, and 2002. I appreciate the waiver of the reinstatement fee since I never received the reports.

As I stated on the phone, I remitted a check on April 30, 2002 in the amount of \$150.00 based on instructions from my accountant, but I did not have the UBR form or send a form with the check. If your office receives the check and it has not been cashed, I humbly request that you void it and return it to me. If you receive notification that it has been cashed, please refund the overpayment of \$150.00. I did not want to delay my reinstatement any further by not sending the full payment with this letter.

Your consideration and assistance in updating my records promptly will be greatly appreciated.

Sincerely,



Leticia A. Ramos
Registered Agent & President