

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # S31635

1. Corporation Name

CAFE GRAND, INC.

Principal Place of Business

Mailing Address

6238 GRAND BLVD
NEW PORT RICHEY FL 34652

6238 GRAND BLVD
NEW PORT RICHEY FL 34652

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/13/1991

5. FEI Number

59-3054026

Applied For

Not Applicable

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
PDST	CATANIA, JOSEPH	6238 GRAND BLVD.	NEW PORT RICHEY FL 34652

300004704873--8
-12/05/01--01001--007
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CATANIA, JOSEPH
6238 GRAND BLVD.
NEW PORT RICHEY FL 34652

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.

Signature of
Registered Agent

Joseph Catania

REGISTERED AGENT MUST SIGN

Date

10/22/01

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:

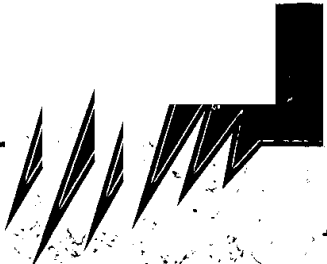
Joseph Catania

Joseph Catania

Date

10/22/01 727-848-7098

Daytime Phone #



SBS Accounting & Tax Service
10032 N. 94th Lane, Peoria, AZ 85345
(623) 773-2645

2052

October 31, 2001

Florida Department of State
Division of Corporations
Corporate Records
P.O. Box 6327
Tallahassee Florida 32314

Re: Café Grand Inc.
6238 Grand Blvd.
New Port Richey Fl 34652
Document # S31635


To Whom It May Concern:

Enclosed please find application for reinstatement of the above named corporation, along with a check for \$150.00.

Be advised that Mr. Catania returned from his sister's funeral to find this paper work. We have always filed this on time and have never had to reinstate the corporation. We ask that the late filing fees be waived, as the original form was never received.

Any help you can give us in this matter, would be appreciated.

Sincerely,



Patricia Roland
Tax Supervisor