

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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To:

Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

12 MAR 26 AM 12:52

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**CORPORATION REINSTATEMENT
MINIBAR NORTH AMERICA, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,200.00

MAR 26 2012

S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



**FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS**

12 MAR 26 AM 12:52

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F940000006107

1. Corporation Name

Minibar North America Inc

2. Principal Office Address - No P.O. Box #

7340 Westmore Rd

Suite, Apt. #, etc.

3. Mailing Office Address

7340 Westmore Rd

Suite, Apt. #, etc.

City & State

Rockville, MD

Zip
20850

Country
USA

City & State

Rockville, MD

Zip
20850

Country
USA

4. Date Incorporated or Qualified
To Do Business In Florida

04/01/94

5. FEI Number

52-186-5714

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

See 7. Additional Fee required
for Certificate of Status

7. Name and Address of Current Registered Agent

Name

C T Corporation System

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

1200 South Pine Island Road, c/o C T Corporation System

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0506 or 617.0603, F.S.

Signature of
Registered Agent

Mark Brinkman

Mark Brinkman

Vice President and Assistant Secretary

Date 3/22/12

REGISTERED AGENT MUST SIGN

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	Anthony J. Torano	7340 Westmore Rd	Rockville MD 20850-1260
Treasurer	Patrick Galgano	7340 Westmore Rd	Rockville MD 20850-1260
Director	Michael Rokoss	7340 Westmore Rd	Rockville MD 20850-1260

10. E-mail Address: Ytong.chen@minibama.com

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information provided on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in this document to the Department of State constitutes a third degree felony as provided for in 617.186, F.S.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patrick Galgano
Patrick Galgano

3/22/12
Date

Daytime Phone #

REINSTATEMENT

MAR 26 2012

S. PRATHEP