

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


FILED

04 APR 20 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P0100028295

1. Corporation Name
Darrel + Oliver's Innovative Food Group, Inc

2. Principal Office Address 2611 E Atlantic Blvd		3. Mailing Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Pompano Beach, FL		City & State	
Zip 33062	Country USA	Zip	Country

700033102357
04/19/04--01082--001 **908.75

4. Date Incorporated or Qualified To Do Business in Florida 3-15-2001

5. FEI Number 65-1102181	Applied For Not Applicable
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6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Darrel Broek

Street Address (P.O. Box Number is Not Acceptable): 2611 E Atlantic Blvd

Suite, Apt. #, Etc.:

City: Pompano Beach, State: FL, Zip Code: 33062

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: Darrel Broek Date: 4.13.04

REGISTERED AGENT MUST SIGN

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	Broek, Darrel	2611 E Atlantic Blvd	Pompano Beach, FL 33062
ST	Saucy, Oliver	2611 E Atlantic Blvd	Pompano Beach, FL 33062

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)(l), 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: Darrel Broek Date: 4.13.04 Daytime Phone #: (954) 782-0606

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (01/04)