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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

05 DEC 23 PM 1:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000023497

1. Corporation Name

Hacienda Careaga Paso Fino Farms Inc.

2. Principal Office Address

5121 SW 178<sup>th</sup> AVE

Suite, Apt. #, etc.

3. Mailing Office Address

5121 SW 178<sup>th</sup> AVE

Suite, Apt. #, etc.

City & State

Ft. Lauderdale FL

City & State

Ft. Lauderdale FL

Zip

33331

Country

USA

Zip

33331

Country

USA

REINSTATEMENT 03-05

4. Date Incorporated or Qualified - To Do Business in Florida 3/23/95

5. FEI Number 65-0636619 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

Arleene Careaga

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

5121 SW 178<sup>th</sup> AVE

Suite, Apt. #, Etc.

City

Ft. Lauderdale

State  
FL

Zip Code

33331

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

*Arleene Careaga*

REGISTERED AGENT MUST SIGN

Date

12/2/04

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
D	Arleene Careaga	5121 SW 178 <sup>th</sup> AVE	Ft. Lauderdale FL 33331
D	Nardy Careaga	5121 SW 178 <sup>th</sup> AVE	Ft. Lauderdale, FL 33331
			300045101833 01/20/05--01033--003 **\$300.00
			300045101833 11/10/05--01042--004 **\$150.00

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

*Arleene Careaga*

12-2-04

REGISTERED AGENT

Date

Daytime Phone #



2012

12-18-2005

To Whom it may concern,

I am writing to inform that Hacienda Careaga Paso Fino Farms, did not receive the 2003 annual reports. We would like to have Hacienda Careaga Paso Fino Farms re-instated as a corporation operating in the state of Florida.

Sincerely,

Nardy Careaga

Vice-president