

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

98 200AR

FILED
00 FEB 18 AM 11:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000092895

1. Corporation Name
FELIPE'S ENTERPRISES INC

Principal Place of Business Mailing Address
7751 SW 26 ST
MIAMI FL 33155

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

a. New Principal Office Address, if Applicable
4179 W 41 LN.
Suite, Apt. #, etc.

b. New Mailing Address, if Applicable
7751 SW 26 ST
Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida
10-28-97

City & State
HIALEAH FL

City & State
MIAMI FL

5. FEI Number
65-0799299

Zip
FL 33010 MIAMI, DADE

Zip
33155 MIAMI, DADE

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	FELIPE BERICIARU	7751 SW 26 ST	MIAMI FL 33155

300003146273
-02/24/00--01058--004
***450.00 ***450.00

SP

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Mercy Rorles
7751 SW 26 ST
MIAMI FL 33155

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City

State FL Zip Code

I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.

[Signature]
REGISTERED AGENT MUST SIGN

Date 1-24-00

i. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on intangible tax.)

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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. 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: Felipe Bericiaru
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 1-24-00 (305) 261-5456
Daytime Phone #

CR2090 (12/95)