

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JAN 27 PM 1:34

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 828029

1. Corporation Name

BRUGAL AND CO., INC.

Principal Place of Business

Mailing Address

2000 N.W. 93RD AVENUE
MIAMI FL 33172

2000 N.W. 93RD AVENUE
MIAMI FL 33172

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

05/26/1972

5. FEI Number

59-1569951

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
P	ARZENO, GEORGE	AVE. JOHN F.KENNEDY #57	SANTO DOMINGO, D.R.
VP	BAEZ, FRANKLIN	JOHN F KENNEDY NO 57	SANTO DOMINGO DR
VPS	BRUGAL, FRANK ERNESTO AMARAL	2000 NW 93 AVE	MIAMI FL 33172
T	BRUGAL, MANUEL A	JOHN F KENNEDY NO 57	SANTO DOMINGO DR
			300025778043 12/26/03--01081--013 **750.00
			300025778043 01/29/04--01020--015 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~MARQUEZ-ESPEVE, RAUL J.A., PA.~~
~~901 PO BOX DE LEON BLVD.~~
~~SUITE 100~~
~~CONCEPCION GABRIEL FL 33134~~

Name

A.J. Barranco, Jr.

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

150 W. Flagler St.,

Suite, Apt. #, Etc.

1400

City

Miami

State

FL

Zip Code

33130

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. or 617.0505, F.S.

Signature of
Registered Agent

A.J. Barranco, Jr.

REGISTERED AGENT MUST SIGN

Date

1/22/04

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:

Ernesto Amaral

ERNESTO AMARAL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12-22-03

Daytime Phone #

(305)
599-2990