

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

F97000006291

FILED

00 NOV 20 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000006291

1. Corporation Name

Distillers Corporation (USA) Limited

2. Principal Office Address

2674 NW 38th Street

3. Mailing Office Address

2674 NW 38th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton, FL

City & State

Boca Raton, FL

Zip

33434

Country

Palm Beach

Zip

33434

Country

Palm Beach

**4. Date Incorporated or Qualified
To Do Business in Florida**

12/1/97

5. FEI Number

52-1161523

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

CT Corporation System

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

1200 S. Pine Island Rd.

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 607.0505 or 617.0503, F.S.

**Signature of
Registered Agent**

Simon Dewhurst

Date 11/20/00

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
D,P	Simon Dewhurst	2674 NW 38th Street	Boca Raton, FL 33434
D	Donald J. Gallow	2674 NW 38th Street	Boca Raton, FL 33434
D,S	Christoffel J. Cronje	2674 NW 38th Street	Boca Raton, FL 33434

REINSTATEMENT 1998-2000

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 taxes 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)(b), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as it made under oath.

SIGNATURE:

Simon Dewhurst
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Simon Dewhurst, President

Date 11/17/2000

Daytime Phone # 561-994-3669