

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

2001 UBR

FILED

01 DEC 21 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # R000000001087

1. Corporation Name

FRIENDS GROCERY, INC.

2. Principal Office Address

14511 S.W. 285TH ST

3. Mailing Office Address

Suite, Apt. #, etc.

LEISURE CITY

Suite, Apt. #, etc.

City & State

FL.

City & State

Zip

33033

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/4/2000

5. FEI Number

65-0970788

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

DAKSHINA SEAL

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

14511 S.W. 285TH ST.

Suite, Apt. #, Etc.

200004764292-9

-01/10/02--01017--004

****150.00 ****150.00

City

LEISURE CITY, FL.

State

FL

Zip Code

33033

LS

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

Dakshina R Seal

Date 12-17-01

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/D	DAKSHINA SEAL	14511 S.W. 285TH ST	LEISURE CITY, FL 33030

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:

Dakshina R Seal

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-17-01

Date

305-246-7001

Daytime Phone #

X 261

CR2E081 (9/00)

2062

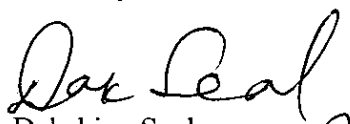
Division of Corporations
Corporate Records
P.O. Box 6327
Tallahassee, Fl. 32314

December 17, 2001

Dear Sir:

Enclosed is a renewal application for Friends Grocery, Inc., Document # P00000001087 for 2001. The original renewal application was never received as a result the corporation was dissolved without our knowledge. I called the Division of Corporations and had an application for reinstatement sent to us. I spoke with someone in the office in Tallahassee and she said to complete the form, send a cover letter explaining the situation and enclose a \$150 check. Accordingly completed application and check is being submitted for your consideration.

Sincerely,


Dakshina Seal
12-17-01