

1004000029671
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 SEP 21 AM 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900039239699

07/16/04--01021--005 **450.00

DOCUMENT # 701000007798

1. Corporation Name

FRESH LOGISTICS, INC.

2. Principal Office Address

7186 NW 12TH STREET

Suite, Apt. #, etc.

City & State

MIAMI, FL

Zip

33126

Country

U.S.

3. Mailing Office Address

5353 N. FEDERAL HIGHWAY

Suite, Apt. #, etc.

City & State

FT. LAUDERDALE, FL

Zip

33308

Country

U.S.

900039239699
07/16/04--01021--006 **8.75

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

01/22/2001

5. FEI Number

65106 8975

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

AGUSTIN CALISTO

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

5353 N. FEDERAL HIGHWAY

Suite, Apt. #, Etc.

City

FT. LAUDERDALE

State

FL

Zip Code

33308

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

7/5/2004

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
PRESIDENT	MIGUEL MASCARO	5353 N. FEDERAL HIGHWAY	FT. LAUDERDALE, FL 33308
VICE PRESIDENT	AGUSTIN CALISTO	CLUB BUZZON @ 101263 7801 NW 37 ST.	MIAMI / FL / 33166

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:

[Signature]

AGUSTIN CALISTO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/05/2004 (213)

Daytime Phone #

CR2E081 (07/04)



282

July 7, 2004

FLORIDA DEPARTMENT OF STATE

Dear Sir or Madam,

JUL 7 2004

We have not received a notification by any mean for the declaration of the Annual Report. Therefore we ask the Secretary of State to waive the penalty for not completing it under the regular schedule. I am attaching the form requesting the reinstatement of FRESH LOGISTICS, INC. along with a check for \$450xx for the same purpose.

Sincerely,


Agustin Calisto
VICE-PRESIDENT
FRESH LOGISTICS, INC.