

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JUN -4 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000030172

1. Corporation Name

Vilchez & Rodriguez Inc

4975 SW 92 Ave

2. Principal Office Address

4975 SW 92 Ave

Suite, Apt. #, etc.

City & State

Cooper City, FL

Zip

33328

Country

US

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 03-04

12/17/03 01008 020558.75

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

03/23/2001

5. FEI Number
65-1088550

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

Rodriguez Dinora

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

4975 SW 92 Ave

Suite, Apt. #, Etc.

City

Cooper City

State
FL

Zip Code
33328

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

See below

Date

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	Rodriguez Dinora	4975 SW 92 Ave	Cooper City FL, 33328
D	Juan Vilchez	4972 SW 92 Ave	Cooper City FL, 33328
D	Belleme Melissa	4975 SW 92 Ave	Cooper City FL, 33328

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:

Juan Vilchez DINORA RODRIGUEZ

06/01/04

Date

Daytime Phone #

CR2E081 (01/04)