

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

APPLICATION
FOR
REINSTATEMENT



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

FILED

03 OCT 23 PM 5:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000073170

1. Corporation Name

DOORSTEP GOURMET, INC.

Principal Place of Business

1150 HILLSBORO MILE #710
HILLSBORO BCH FL 33062

Mailing Address

1150 HILLSBORO MILE #710
HILLSBORO BCH FL 33062



10/23/03-01075-034 **150.00

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/23/2001

5. FEI Number

65-1124646

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DPTV	NAYLOR, JEFFREY	1150 HILLSBORO MILE #710	HILLSBORO BCH FL 33062
S	NAYLOR, JEFFREY	1150 HILLSBORO MILE #710	HILLSBORO BCH FL 33062

REINSTATEMENT

8. Name and Address of Current Registered Agent

NAYLOR, JEFFREY
1150 HILLSBORO MILE #710
HILLSBORO BCH FL 33062

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/15/03

561
443-2019

CH2E040 (7/03)

2 of 2

To Whom it MAY concern,

Enclosed is a check for 150.00
to activate to use of my company
NAME of Doorstep Gourmet effective
immediately... My company - NEVER - relieved
the original to make the payment
earlier this year.

Also please note my new
address is listed below for future
correspondence.

Any questions regarding this
matter you can reach me @
(561) 443-2019.

Thank you
Jeff Walton
OWNER Doorstep Gourmet

Doorstep Gourmet
275 Westwood Circle East
West Palm Beach Fla 33411