

182  
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 MAY 24 AM 8:00

**DOCUMENT #** P01000102260

**1. Corporation Name**

Propioplast, Inc.

4775 Nw. 72 Ave.

4775 Nw. 72 Ave.

**2. Principal Office Address**

4775 Nw. 72 Ave.

**3. Mailing Office Address**

4775 Nw. 72 Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**City & State**

Miami, Florida

**City & State**

Miami, Florida

**Zip**

33166

**Country**

USA

**Zip**

33166

**Country**

USA

**REINSTATEMENT** 03-04  
THURS

5/17/04 01069 014 \*158.75

**4. Date Incorporated or Qualified  
To Do Business in Florida** 10/22/2001

**5. FEI Number**  
651149234

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**

Marancenbaum, R. Teddy

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

4775 NW 72 Ave.

Suite, Apt. #, Etc.

**City**

Miami, Florida

**State**  
FL

**Zip Code**  
33166

**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** 05/19/2004

**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
D/P	Marancenbaum, R. Teddy	4775 NW 72 Ave.	Miami, FL 33166
D/VP	Fisher, Ewaldo	4775 NW 72 Ave.	Miami, Florida 33166
D/T	Marancenbaum, Helen	4775 NW 72 Ave.	Miami, Florida 33166
D/S	Marancenbaum, Rony	4775 NW 72 Ave.	Miami, Florida 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]* HELEN MARANCENBAUM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/19/2004  
Date

305-436-3070

Daytime Phone #

CR2E081 (01/04)

282

05/19/2004

Florida Department of State

To Whom It May Concern:

Propioplast Inc. request the Florida Department of State to make the following corrections on the form. After having a telephone conversation with one of the officers I was informed that you had sent Propioplast a letter with date May 12, 2003 which was never received. The annually fees for the years 2003 and 2004 were long ago paid.

Propioplast Inc.  
4775 NW 72 Ave.  
Miami, FI 33166

Director / President  
Marancenbaum, R. Teddy  
4775 NW 72 Ave.  
Miami, FI 33166

Director / Vice President  
Fischer, Ewaldo  
4775 NW 72 Ave.  
Miami, FI 33166

Director / Treasurer  
Marancenbaum, Helen  
4775 NW 72 Ave.  
Miami, FI 33166

Director / Secretary  
Marancenbaum, Rony  
4775 NW 72 Ave.  
Miami, FI 33166

Thanks for your concern, waiting for a soon response.

  
Teddy Marancenbaum