

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 SEP 14 AM 8:00

DOCUMENT# P01000105640

1. Corporation Name

Sunshine Donuts Corporation

2. Principal Office Address

701 S.W. 27TH AVE

Suite, Apt. #, etc.

G-3

City & State

Miami, FL

Zip

33135

Country

U.S.O.

3. Mailing Office Address

701 S.W. 27TH AVE

Suite, Apt. #, etc.

G-3

City & State

Miami, FL

Zip

33135

Country

USA

REINSTATEMENT

03-04
MRB

4. Date Incorporated or Qualified
To Do Business in Florida

11/1/2001

5. FEI Number

65-1148983

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

Carlos B. Reyes

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

701 S.W. 27TH AVE

Suite, Apt. #, Etc.

G-3

City

Miami

State

FL

Zip Code

33135

2004 SEP - 9

RECEIVED
DEPT. OF REVENUE

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

Carlos B. Reyes

Date

9/9/04

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	Carlos B. Reyes	1252 NW 5TH ST #12 Miami, FL 33128	Miami, FL 33128
S/T	Edna A. Calamia	1252 NW 5TH ST #12 Miami, FL 33128	Miami, FL 33128

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:

Carlos B. Reyes Carlos B. Reyes

Date

9/9/04

Daytime Phone #

(305) 644-9055

CR2E081 (01/04)