

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 MAY -9 PM 1:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000121288

1. Corporation Name

Topeca Holdings, Inc.

2. Principal Office Address

137 East Enid Dr.

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Key Biscayne

City & State

Fl.

Zip

33149

Country

USA

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

12-26-2001

5. FEI Number

01-0615242

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

Erika Hoffmann

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

137 East Enid Dr.

Suite, Apt. #, Etc.

City

Key Biscayne

State

FL

Zip Code

33149

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

*Erika Hoffmann*

REGISTERED AGENT MUST SIGN

Date 4-15-2003

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
Pres.	Erika Hoffmann	137 East Enid Dr.	Key Biscayne, Fl. 33149
Direc	Peter A. Hoffmann	137 East Enid Dr.	Key Biscayne, Fl. 33149
Direc	Paul Hoffmann	137 East Enid Dr.	Key Biscayne, Fl. 33149
Direc	Carlos E. Recao	137 East Enid Dr.	Key Biscayne, Fl. 33149

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Erika Hoffmann

4-15-2003 305 790-8320

Date

Daytime Phone #

CR2E081 (10/02)

2612

# Topeca Holdings, Inc.

138 N.W. 25<sup>th</sup> St. Miami, FL 33127  
Phone (305) 790-8320 Fax (305) 361-5310

April 15 2003

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Reinstatement Explanation

Gentlemen:

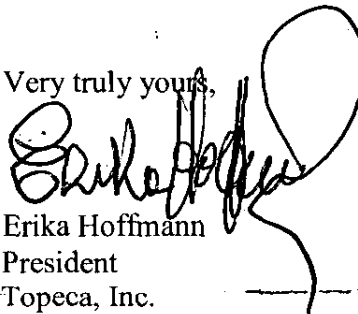
Attached you will find the form for Reinstatement of TOPECA HOLDINGS, INC., document No. P01000121288, incorporated on 12-26-2001.

Up to this date we have not received any Uniform Business Report to be filled with the respective fee, and due this, payments have not been made, attached is the Reinstatement Report with a check in the amount of \$300.00 for the 2 years of filling.

Please consider this matter in order to bring to status the corporation and send all other correspondence to the address on this letterhead.

With nothing further,

Very truly yours,



Erika Hoffmann  
President  
Topeca, Inc.