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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 03-05 TR

DOCUMENT # P02000083114

1. Corporation Name
LA PARRILLA DE PANCHO INC.

2. Principal Office Address	3. Mailing Office Address
628 S. STATE ROAD 7 (441)	628 S. STATE ROAD 7 (441)
Suite, Apt #, etc	Suite, Apt. #, etc
City & State: MARGATE, FL	City & State: MARGATE, FL
Zip: 33068 Country: UNITED STATES	Zip: 33068 Country: UNITED STATES

4. Date Incorporated or Qualified To Do Business in Florida: 08/01/2002

5. FEI Number: 81-0567922 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: ELIANA SERRANO

Street Address (P.O. Box Number is Not Acceptable): 628 S. STATE ROAD 7 (441)

Suite, Apt. #, Etc.

City: MARGATE State: FL Zip Code: 33068

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: Eliana Serrano Date: MARCH 4, 2005
REGISTERED AGENT MUST SIGN

DR2E091 (01/05)

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
VP	ELIANA SERRANO	628 S. STATE ROAD 7 (441)	MARGATE, FL 33068
P	WILMAR CARDONA	628 S. STATE ROAD 7 (441)	MARGATE, FL 33068

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: Eliana Serrano ELIANA SERRANO — MARCH 4,2004 — (954)975-8948
SIGNATURE AND TYPED OR PRINTED NAME OF MORNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Florida Department of State

Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

LA PARRILLA DE PANCHO INC.

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