

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED
FILED

04 NOV -9 AM 9:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000096624

1. Corporation Name

AGROTECH FLORAL INTERNATIONAL CORP.

AGROTECH

2. Principal Office Address

12285 SW 151th ST # 306

Suite, Apt. #, etc.

City & State

MIAMI, FL

Zip

33186

Country

DADE

3. Mailing Office Address

12285 SW 151th ST # 306

Suite, Apt. #, etc.

City & State

MIAMI, FL.

Zip

33186

Country

DADE

REINSTATEMENT 03-24

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

45-0486443

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

ANGELO SILVA

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

19230 NW 50th AVE.

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33055

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

10-13-04

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
PD	SALKEY FLOYD	19230 NW 50th AVE	MIAMI, FL. 33055
UD	SILVA ANGELO	19230 NW 50th AVE	MIAMI, FL. 33055
PD	RICARDO CHAN	17586 SW 29th ST.	MIRAMAR, FL. 33029

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/13/04

Date

Daytime Phone #

Brito & Brito Accounting
407 Lincoln Road, Suite 500
Miami Beach, FL 33139
Corporate Accounting and Business Development
Tel: (305) 534-9292/ Fax: (305) 534-7534
britogeorge@aol.com/britoandbrito@aol.com

November 16, 2004

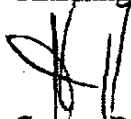
Department of State
Attention: Tina
850-245-6017

Re: Agrotec Floral Corp.

To Whom It May Concern:

Please note that the above tax payer did not receive his annual report for 2003 and 2004. Please
Accept his payment and abate all penalties on their account.

Thanking you in advance.


George Brito
CPA