

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -3 AM 10:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000099527

1. Corporation Name

MI TIERRA RESTAURANT AND BAR, INC.

Principal Place of Business

2330 SOUTH PINE AVENUE
OCALA FL 34471

Mailing Address

2330 SOUTH PINE AVENUE
OCALA FL 34471



REINSTATEMENT 03

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/12/2002

5. FEI Number

55-0798644

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
Pres.	JOSE F. PERDOMO	16751 SE 19th Ct.	Summerfield, FL 34491
V.P.	FRANCISCO J. PERDOMO	16751 SE 19th Ct.	Summerfield, FL 34491

000024382160
11/09/03--01073--005 **150.00

8. Name and Address of Current Registered Agent

PERDOMO, FRANCISCO J
2330 SOUTH PINE AVENUE
OCALA FL 34471

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Francisco J. Perdomo
REGISTERED AGENT MUST SIGN

Date 10-31-03

11. 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:

Francisco J. Perdomo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-31-03

Date

352-245-9798
~~927-447~~

Daytime Phone #

October 30, 2003

Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

Re: MI Tierra Restaurant and Bar
2330 South Pine Avenue
Ocala, FL 34471

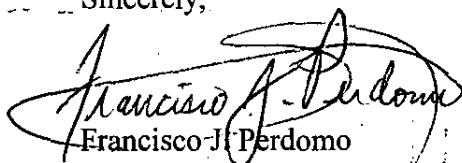
EIN # 55-0798644

Dear Sir or Madam:

I am writing this letter to ask you to waive the reinstatement fee since the above named corporation did not receive the first two uniform business report notices.

Thank you for any consideration you give to this matter.

Sincerely,


Francisco J Perdomo