

PS 1041

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR -8 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P0200013011*

1. Corporation Name

AGRI-OCALA, INC.

2. Principal Office Address

2477 NW 155th Street

Suite, Apt. #, etc.

City & State

CITRA, FL

Zip

32113

Country

USA

3. Mailing Office Address

2477 NW 155th Street

Suite, Apt. #, etc.

City & State

CITRA, FL

Zip

32113

Country

USA

REINSTATEMENT

03-04

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

81-0584860

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

Betty Young

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

7950 NW 80th Ave

Suite, Apt. #, Etc.

City

Ocala

State

FL

Zip Code

34482

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

Betty Young

REGISTERED AGENT MUST SIGN

Date

3/2/04

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
<i>P.</i>	<i>ESMERALDA SANCHEZ</i>	<i>18934 NW 60th Street</i>	<i>Reddick, FL 32686</i>
<i>V.P.</i>	<i>JOSE JUAN VAZQUEZ</i>	<i>2477 NW 155th Street</i>	<i>CITRA, FL 32113</i>
<i>T.</i>	<i>BETTY A. YOUNG</i>	<i>7950 NW 80th Ave.</i>	<i>OCALA, FL 34482</i>
<i>S.</i>	<i>BETT A. YOUNG</i>	<i>7950 NW 80th Ave.</i>	<i>OCALA, FL 34482</i>

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:

Betty Young

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/2/04

Date

(352) 427-0665

Daytime Phone #

CR2E081 (07/04)

pg 2 of 2

**AGRI-OCALA, INC.
2477 NW 155TH STREET
CITRA, FL 32113**

March 3, 2004

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

#P02000130111
Re: Request to Waive the fee \$600.00, zip code not correct, never received forms

Dear Sir or Madam:

I never received my renewal form for my corporation. I went online because my accountant informed me that I could renew the corporation online. To my amazement when I went to renew online it would not allow me because it was in active. When I researched my company I found the zip code is not correct. As per my conversation with Mrs. Johnson from your agency, I'm sending you this letter to request that you please wave the fee of \$600.00; kindly except the fee of \$300.00 to renew, and enter in the correct information as stated on my Reinstatement Form. I thank you.

Sincerely,

JOSE VAZQUEZ

Jose Juan Vazquez
Vice President/Owner