

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 OCT 18 PM 3:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P03000150267

1. Corporation Name  
GLORIA'S FRUTTY-CUBA CORP.

3553 W 76 STREET

2. Principal Office Address  
3553 W 76 STREET

3. Mailing Office Address

Suite, Apt. #, etc.  
BAY 9

Suite, Apt. #, etc.  
BAY 9

City & State  
HIALEAH, FL

City & State  
HIALEAH, FL

Zip Country  
33018 USA

Zip Country  
33018 USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number  
20-0496719

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  
FERNANDEZ-BERGNES & ASSOCIATES, PA

Street Address (P.O. Box Number is Not Acceptable)  
7490 WEST FLAGLER STREET

Suite, Apt. #, Etc.

City  
MIAMI

State Zip Code  
FL 33144

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

REGISTERED AGENT MUST SIGN

Date

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
PTS	ARNOLDO CABRERA	3553 W. 76 STREET, BAY#9	HIALEAH, FL 33018

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

Date

Daytime Phone #

CR2E081 (01/04)

October 15<sup>th</sup>, 2004

Florida Department of State  
PO Box 6198  
Tallahassee, FL 32314

Hello:

My new CPA has told me that my corporation is inactive because the UBR was not filed this year. I incorporated last year and was not aware of such annual filing. The business address on all the correspondence is the right one. However, the location was under construction and not ready. Therefore, no mailboxes were in place and mail could not be delivered there. This is probably the reason why I never received the notice.

I sincerely apologize for this mistake. Enclosed I've included the form and the payment. Thank you for your attention and understanding.

Sincerely,



Arnoldo Cabrera  
President