

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2016 APR -7 AM 8:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000043729

1. Corporation Name

KC Food and Gas Inc

2. Principal Office Address - No P.O. Box #

1386 Shuman Drive

Suite, Apt. #, etc.

City & State

Sebastian, FL

Zip

32958

Country

USA

3. Mailing Office Address

1386 Shuman Drive

Suite, Apt. #, etc.

City & State

Sebastian, FL

Zip

32958

Country

USA

CR2E081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida

03/23/2005

5. FEI Number

20-2552453

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED
Yes

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Agarwal, Dhanraj

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

1386 Shuman Drive

Suite, Apt. #, Etc.

City

Sebastian

State

FL

Zip Code

32958

600284323466
04/07/16--01024--016 **\$08.75

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 0402.2016

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
P	Agarwal, Dhanraj	1386 Shuman Dr	Sebastian, FL 32958
V	Agarwal, Krishna	1386 Shuman Dr	Sebastian, FL 32958
D	Jain, Mike	1394 Shuman Dr	Sebastian, FL 32958

REINSTATEMENT

2015-2016

DD 4/1/16

10. E-mail Address: krsfinancial@aol.com

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

Dhanraj Agarwal

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/2016

772-388-9570
Daytime Phone #