

FILED  
12 APR 23 PM 3:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P05000142676

Coco Rico Central Florida, Inc.

14408 Okonis Ct.

Same

Suite, Apt. #, etc.

City &amp; State

## Orlando, Florida

Country

Country

32837

Name \_\_\_\_\_

# Rosa Santana

14408 Okonis Ct.

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32837

Signature of  
Registered Agent

Date 04/18/12

REGISTERED AGENT MUST SIGN

### Titles

Name of  
Officers and/or Directors

**Street Address of Each Officer and/or Director**

City / State / Zip

MĞN

## Osmel Santana

14408 okonis Ct

Orlando Fl. 32837

MGN-A

# Rosa Santana

14408 Okonis Ct.

Orlando Fl. 32837

~~S. HAWKES~~

APR - 2012

**EXAMINER**

10. E-mail Address: 520540P30@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:**

04/18/12

407-4685321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_

Daytime Phone #