

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # P18856

1. Corporation Name

AMARO FOOD ENTERPRISES, INC.

Principal Place of Business

C/O EDWARD REY  
2180 N.W. 19TH AVENUE  
MIAMI FL 33142

Mailing Address

C/O EDWARD REY  
2180 N.W. 19TH AVENUE  
MIAMI FL 33142

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

04/15/1988

5. FEI Number

22-2624466

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)

| 1<br>Title(s)            | 2<br>Name of Officers<br>and/or Directors | 3<br>Street Address of Each<br>Officer and/or Director | 4<br>City / State / Zip                     |
|--------------------------|---|--|---|
| <del>DELIVER</del><br>PD | <del>DELIVER</del><br>PEREZ, GERARDO      | <del>DELIVER</del><br>6126-28 PALISADES AVE            | <del>DELIVER</del><br>W NEW YORK NJ         |
| PD<br><del>PD</del>      | PEREZ, FELIX                              | 6126-28 PALISADES AVE<br>2011 8th Street               | W NEW YORK NJ<br>NORTH BRUNSWICK N.J. 07047 |
| C.E.O.<br>TD             | REY, JOSE A.                              | 6126-28 PALISADES AVE<br>2011 8th Street               | W NEW YORK NJ<br>NORTH BRUNSWICK N.J. 07047 |
|                          |   |  |   |
|                          |   |  |   |
|                          |   |  |   |

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8. Name and Address of Current Registered Agent

REY, EDWARD  
2180 N.W. 19TH AVENUE  
MIAMI FL 33142

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

SIGNATURE

Date

REGISTERED AGENT MUST SIGN

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:

SIGNATURE  
Jose A. Rey  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-15-2003

Date

(305) 324-7471

Daytime Phone #

CR2E040 (7/03)



## Amaro Foods Enterprises, Inc.

2180 NORTH WEST 19TH AVENUE • MIAMI, FLA. 33142  
TEL. (305) 324-7471 • FAX: (305) 324-1324

*Reyew*

October 15, 2003

Mr.: Tyrone Scott  
Florida Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

Dear Mr.: Scott.

This letter is to respectfully request the Reinstatement of Active Status to our Corporation (Amaro Food Enterprises, Inc), F.E.I Number 22-2624466, and the penalty for not filing in proper time, also to be waived.

The application together with a check for \$ 150.00 was sent to the Florida Department of Revenue. This was a very bad clerical mistake, and to compound the problem, the check was received and deposited in the Florida State Treasury account, and never returned to us. That made us unaware of the mistake, and missed the filing of the Uniform Business Report Form in a timely manner.

I am enclosing a check for the original report filing of \$ 150.00 together with the reinstatement form filled.. Also a copy of the original filed report, and photocopy of the check sent to the Florida Department of Revenue by mistake. We will also like to inform you that it will be our own responsibility to recover, if possible, the check sent to the Florida Department of Revenue.

Please Mr. Scott do no hesitate to call me with any questions that this transaction may arise, and you can be assured that I will make everything I can, to make sure that this kind of mistake do not occur again.

Again I respectfully request your help in resolving this great oversight from us, and I also anticipated my thanks to you and everybody else in your Department.

Very truly yours

José A. Rey. C.E.O