

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS



FILED

97 DEC -1 PM 1:48

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P93000017771**

1. Corporation Name
GAZA & BET HANINA FOOD, INC.

Principal Place of Business
**163 NW 14 STREET
 MIAMI FL 33136**

Mailing Address
**163 NW 14 STREET
 MIAMI FL 33136**



REINSTATEMENT 97

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		4. Date Incorporated or Qualified To Do Business in Florida		03/09/1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number		65-0393719	
City & State		City & State		Applied For		Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PSTD	YAD YARA SALHOUT	163 NW 14 STREET	MIAMI FL 33136
			800002363468--8 -12/04/97--01107--008 ****750.00 ****750.00

The Registered agent & are the same as signed in both places. Mr. Yad Yara Salhout is the registered agent, not changed and sole stock holder. Please eliminate the attorney

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
VALEDIO WHITNEY M. LESQ 201 W. FLAGLER ST. MIAMI, FL 33130		Name: <i>Yad Yara Salhout</i> Street Address (P.O. Box Number is Not Acceptable): <i>163 NW 14 ST. MIAMI FL 33136</i> Suite, Apt. #, Etc.: City: State: 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.

Signature of Registered Agent: *Yad Yara Salhout* Date: *10/27/97*
 REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

(See other side for information on Intangible tax.)

12. 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: *Yad Yara Salhout* Date: *10/27/97*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CP2E040 (8/97)