PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith -

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000070462

Country

1. Corporation Name

COCO'S NURSERY, INC.

Principal Place of Business

Mailing Address

15701 NW 127TH AVE MIAMI FL 33016

15701 NW 127TH AVE MIAMI FL 33016

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

New Principal Office Address, If Applicable	New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

4. Date Incorporated or Qualified To Do Business in Florida

10/11/1993

5. FEI Number

65-0449169

FIED

02 DEC -5 AM 9:55

Applied For Not Applicable

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)				
Title(s) 1	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	
DS	FERNANDEZ, SONIA	3601 W 12TH AVE	HIALEAH FL 33013	
DP	FLORES, ORESTES	12200 SW 4TH TER	MIAMI FL 33174	
		20	7:009366802)20(017007 **158.75	
		12/05/)201011UU/ **158.75	
	8. Name and Address of Current Registered Age	nt 9. Name and A	ddress of New Registered Agent	

FERNANDEZ. SONIA 3601 W 12TH AVE HIALEAH FL 33013

9. Name and Address of New Registered Agent Name

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

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. or 617.0505, F.S.

Signature of Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

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 filling 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.

Daytime Phone #

CR2E040

COCO'S NURSERY, INC. 15701 NW 127TH AVE • MIAMI, FL. 33016 PH. 305-827-4589

November 29, 2002

To Whom It May Concern:

Please be advised that we did not receive the first 2002 UBR. Per your instructions, we are sending the second 2002 UBR sent by the Division of Corporations. It is signed and includes a check for \$158.75 (Certificate of Status fee included). Should you have any questions, please contact us at the phone number or address above.

Sincerel

Orestes Plores, President