

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT



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

APPROVED AND FILED

96 DEC 23 AM 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000074231**

1. Corporation Name

C & V EXPORT COMPANY

Principal Place of Business

Mailing Address

2201 S.W. 98TH COURT
MIAMI FL 33165

2201 S.W. 98TH COURT
MIAMI FL 33165



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

10/06/1994

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0532429

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED

\$6.75. 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
PD	BROWN, MAYDA	2201 S.W. 98TH COURT	MIAMI FL 33165
VSTD	BROWN, JACK W	2201 S.W. 98TH COURT	MIAMI FL 33165
VD	CABRERA, REINALDO	10016 S.W. 20TH STREET	MIAMI FL 33165
200002037872--3 -12/24/96--01185--007 ****363.75 ****363.75			
REINSTATEMENT 1996			

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BROWN, JACK W
2201 S.W. 98TH COURT
MIAMI FL 33165

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.

Signature of Registered Agent

Jack W Brown

REGISTERED AGENT MUST SIGN

Date

12-15-96

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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)(f), 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:

Jack W Brown
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-15-96

Date

820-5869

Daytime Phone #