

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 MAY -8 AM 9:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000041341

1. Corporation Name

HICKEY ORGANIC GRINDING, INC.

2. Principal Office Address

10348 FOX TRAIL ROAD S

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

506

Suite, Apt. #, etc.

City & State

ROYAL PALM BEACH FL

City & State

Zip

33411

Country

USA

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

05/17/1995

5. FEI Number

59-3320686

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

HICKEY, JOHN W

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

10348 FOX TRAIL ROAD S

Suite, Apt. #, Etc.

506

City

ROYAL PALM BEACH

State

FL

Zip Code

33411

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*John W. Hickey*

Date

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PTS	HICKEY, JOHN W	10348 FOX TRAIL ROAD S #506	ROYAL PALM BEACH, FL 33411
V	HICKEY, NANCY J	10348 FOX TRAIL ROAD S #506	ROYAL PALM BEACH, FL 33411

10. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*John W. Hickey*

Date

5/6/03

Daytime Phone #

407 492 4742

CR2E081 (10/02)

**HICKEY ORGANIC GRINDING, INC.**  
**10348 FOX TRAIL ROAD S #506**  
**ROYAL PALM BEACH, FL 33411**

May 6, 2003

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

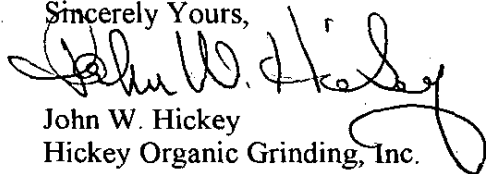
RE: Document # P95000041341

To Whom It May Concern:

It has come to my attention, that the Uniform Business Report forms have not been filed for our corporation.. Please note the address is incorrect on the report and the registered agent's address has changed. We have always filed our reports on time and respectively request that you accept our check for \$450.00 to cover the 2001, 2002, 2003 filing fees.

Thank your for your consideration in this matter.

Sincerely Yours,



John W. Hickey  
Hickey Organic Grinding, Inc.  
President