

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 DEC -2 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000003353

1. Corporation Name

MARbella Market, Inc.

2. Principal Office Address

10115 W Okeechobee Rd

Suite, Apt. #, etc.

City & State

Hialeah Gardens, FL

Zip

33016

Country

USA

3. Mailing Office Address

10115 W. Okeechobee Rd

Suite, Apt. #, etc.

City & State

Hialeah Gardens, FL

Zip

33016

Country

USA

REINSTATEMENT 03

200025158622

12/02/03--01039--008 **150.00

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0632835

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$3.75 Additional Fee applies
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

MANUEL M. GUTIERREZ

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

8516 NW 196 TER

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33015

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

Date 11/26/03

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
DPST	MANUEL M. GUTIERREZ	8516 NW 196 TERR	MIAMI, FL, 33015

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

MANUEL M. GUTIERREZ

11/26/03 305

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

Marbella Market, Inc.

**10115 W Okeechobee Rd.
Hialeah Gardens, Florida, 33016**

Miami, November 26th, 2003

Florida Department of State
Division of Corporations

**Ref: Change of mailing address
Doc # P96000003353**

As was instructed by one of your officers by the phone this letter is to inform that I did not receive any mail from the Department of State referring the renovation of my corporation the last year I changed the address but look that the mailing address was not included correctly in this change, please take note of my mailing address and adj. you will find the check as payment for the UBR 2003.

Corporation name :	MARBELLA MARKET, INC.
Document Number:	P96000003353
New Address:	10115 W OKEECHOBEE RD. HIALEAH GARDENS, FLORIDA, 33016

Thanks for your help.



Manuel M. Gutierrez
President