

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

00 JAN 13 PM 12:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000009046

1. Corporation Name

E. G. VENDING CORP.

Principal Place of Business

Mailing Address

9715 FONTAINEBLEAU BLVD.  
APT 417  
MIAMI, FL 33172

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

2. New Principal Office Address, If Applicable  
7700 W. 24 AVE.

3. New Mailing Office Address, If Applicable

REINSTATEMENT

99-00

4. Date Incorporated or Qualified  
To Do Business in Florida 01/25/1996

Suite, Apt. #, etc.  
suite 10

Suite, Apt. #, etc.

5. FEI Number  
65-0642999

Applied For  
Not Applicable

City & State  
HIALEAH, FL

City & State

Zip  
33016

Country

Zip

Country

6. 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 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	EDWARD MATUSIAK	7700 W. 24 AVE. suite 10	HIALEAH, FL 33016
			200003105022--0 -01/20/00--01108--005 ****500.00 ****500.00
			200003105022--0 -01/20/00--01108--006 ****400.00 ****400.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ANTONIO H HESPANHOL  
9715 FONTAINEBLEAU BLVD.  
APT 417  
MIAMI, FL 33172

Name  
EDWARD MATUSIAK

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

7700 W. 24 AVE.

Suite, Apt. #, Etc.

suite 10

City  
HIALEAH

State  
FL

Zip Code  
33016

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

*Edward Matusiak*

REGISTERED AGENT MUST SIGN

Date

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

prepared by: EDWARD MATUSIAK 7700 W. 24 AVE. suite 10 Hialeah, FL 33016

KE