

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

98 APR 28 AM 8:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P96-23059**

1. Corporation Name  
**AGRICOLA XENES, INC.**

Principal Place of Business  
**12070 SW. 118th St.  
Miami, FL 33133**

Mailing Address  
**12070 SW. 118th St.  
Miami, FL 33133**

**REINSTATEMENT** 97-98  
7040  
4/28/98

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 <b>3/14/96</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
City & State		City & State		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
Zip	Country	Zip	Country		

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
D	CAMPA, ERNESTO J	12070 SW. 118th St.	Miami, FL
D	CAMPA, JORGE	12070 SW. 118th St.	Miami, FL
D	CAMPA, ERNESTO SR	7642 Sea Breeze	Lake Worth, FL
D	de la Campa, Alicia	9703 SW. 132nd St.	Miami, FL
D	Martinez, Ana Maria	9703 SW. 132nd St.	Miami, FL
D/S	Gutierrez Jr., Nicolás J.	1101 Brickell Ave. Ste. 1400 Miami, FL 33131	700002519547--3 -05/12/98--01013--003 ***5206.25 ***300.00 Miami, FL

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name <b>Gutierrez Jr. Est. Nicolás J.</b>	
Street Address (Post Office Box Number is Not Acceptable) <b>1101 Brickell Ave.</b>	
Suite, Apt. #, Etc. <b>Ste. 1400</b>	
City <b>Miami</b>	State Zip Code <b>FL 33131</b>

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: **Nicolás J. Gutierrez Jr.** Date: **4/28/98**

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: **Nicolás J. Gutierrez Jr.** SIGNING OFFICER OR DIRECTOR Date: **4/28/98** (505) 373-0530

CR2E040 (1/98)