

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 MAR -6 AM 11:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000009537

1. Corporation Name

ALAN KING KOSHER FOOD PRODUCTS, INC.

2. Principal Office Address

200 N.W. 20th Avenue

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL

Zip

33311

Country

Broward

3. Mailing Office Address

200 N.W. 20th Avenue

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL

Zip

33311

Country

Broward

**4. Date Incorporated or Qualified
To Do Business in Florida**

1/29/98

5. FEI Number

65-0825897

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

GEORGE BELL

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

200 N.W. 20th Avenue

Suite, Apt. #, Etc.

City

Fort Lauderdale

State

FL

Zip Code

33311

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

George Bell

REGISTERED AGENT MUST SIGN

Date 3/2/00

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
D	Morris Levy	11 Sinclair Drive	Kings Point, NY 11024
D	Stephen Levy	11 Sinclair Drive	Kings Point, NY 11024
D	Alan King	40 Shore Drive	Great Neck, NY 11024
D	Robert Pirozzi	1999 N. Federal Highway	Boca Raton, FL 33432
D	Erwin Hartman	5860 Bridleway Circle	Boca Raton, FL 33496
D	George Bell	17130 Coral Cove Way	Boca Raton, FL 33496

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:

George Bell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/2/00

Date

(954) 463-0222

Daytime Phone #