

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

99 OCT 27 PM 2:14

DOCUMENT # p98000041437

1. Corporation Name

BERGEN SOUTH, INC.

Principal Place of Business

Mailing Address

Same

7201-11 Bergenline Avenue
 North Bergen, NJ 07047

REINSTATEMENT 99

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

05/05/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

Not Applicable

City & State

City & State

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee is added 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	2	3	4
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PTD	CASTEX, MERCEDES	7201-11 Bergenline Avenue	North Bergen, NJ 07047
VSD	CASTEX, AUGUSTO	7201-11 Bergenline Avenue	North Bergen, NJ 07047
			000003034070-- 7 -11/03/99--01063--008 ****750.00 ****750.00
			<i>Handwritten initials</i>

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SIEGEL, GARY R
 7700 NORTH KENDALL DRIVE
 SUITE 610
 MIAMI, FL 33156

Name
 Street Address (P.O. Box Number is Not Acceptable)
 Suite, Apt. #, Etc.
 City State Zip Code
 FL

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

Gary R. Siegel

REGISTERED AGENT MUST SIGN

Date 10-13-99

11. This corporation owes 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

Mercedes Castex, President

10/22/99

Date

201-854-6183

Daytime Phone #

CR2E061 (12/98)