PLICATION THIS FORM. **APPLICATION** erine Harris **FOR** Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 99 NOV -8 'PM 12: 49 P98000044503 DOCUMENT # 1. Corporation Name STOP & SAVE FOOD STORE #5002, INC. Principal Place of Business Mailing Address 1692 W. HILLSBORO BLVD. 1892 W. HILLSBORO BLVD. DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 2012 Poweline RS Powerline Rd 404 406 DIACTO CA BUSINESS F(3344) DEATHER BUSINESS IN A A A A CONTRACT OF Dearted Bused F(3344) 2 New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified
 To Do Business in Florida 05/07/1998 Suite, Apt #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For 65-0837779 City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status Zip CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director City / State / Zip Title(s) PD KHAN, RANA M 281 FORSYTH ST. **BOCA RATON FL 33487** SD SOHID, MD. 281 FORSYTH ST. **BOCA RATON FL 33487** 900003052229; -11/23/99--01004--001 ****150.00 ****150.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent COHEN, FRANCES Street Address (P.O. Box Number is Not Acceptable) 1692 W. HILLSBORO BLVD. DEERFIELD BEACH FL 33442 Suite, Apt. #, Etc. City State | Zip Code 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 Date REGISTERED AGENT MUST SIGN 11. Leartify that Lam 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 cath. SIGNATURE:

0059084

TAX HELP OF BOCA RATON 855 SOUTH FEDERAL HIGHWAY # 205 BOCA RATON, FLORIDA 33432 NOVEMBER 4, 1999

DIVISION OF CORPORATIONS ANNUAL REPORT/REINSTATEMENT SECTION P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314-6327

RE:STOP & SAVE FOOD STORE #5002, INC. P98000044503

GENTLEMEN:

MY ABOVE REFERENCED CLIENT SUBMITTED YOUR RECENT CORRESPONDENCE TO ME INDICATING THAT THIS CORPORATION HAS BEEN ADMINISTRATIVELY DISSOLVED.

PLEASE BE AWARE THAT MY CLIENT NEVER RECEIVED YOUR FIRST OR SECOND NOTICE REQUIRING PAYMENT. THE CORPORATION INTENDS TO STAY IN BUSINESS AND CERTAINLY IS NOT TRYING TO AVOID ITS OBLIGATIONS.

WE ARE ENCLOSING A COPY OF HIS SALES TAX COUPON AND A FEDERAL TAX COUPON REFLECTING MY CLIENTS CORRECT PHYSICAL ADDRESS. AS YOU CAN SEE THIS IS NOT THE ADDRESS USED IN YOUR CORRESPONDENCE.

PLEASE FIND ENCLOSED A CHECK FOR \$ 150.00. UNDER THE CIRCUMSTANCES, WE WOULD SINCERELY APPRECIATE YOU REINSTATING THE ABOVE CORPORATION. THANK YOU.

VERY TRULY YOURS,

TAX HELD OF BOCA MATON

ALAN L.SCHWARTZ, PRESIDENT

ENCS.