

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1999

**CORPORATION
REINSTATEMENT**



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

FILED

00 JAN 12 PM 3:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000067194

1. Corporation Name

G-R FISHERIES, INC.
890 15TH STREET OCEAN
MARATHON, FL 33050

2. Principal Office Address

890 15TH STREET

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MARATHON, FL

City & State

Zip

33050

Country

MONROE

Zip

Country

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

7-31-98

5. FEI Number

65-0861512

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name

ROSA O. TEJEDA

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

890 15TH STREET

Suite, Apt. #, Etc.

City

MARATHON, FL

State

FL

Zip Code

33050

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

Rosa O. Tejeda

REGISTERED AGENT MUST SIGN

Date

1-7-00

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
PRES. SEC. TREAS.	ROSA O. TEJEDA	890 15TH STREET	MARATHON, FL 33050
			800003112218--9 -01/27/00--01010--008 ****150.00 ****150.00
			900003112229--7 -01/27/00--01010--009 ****150.00 ****150.00

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:

Rosa O. Tejeda

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-00

Date

305-743-5763

Daytime Phone #

JANUARY 7, 2000

(2)

DIVISION of CORPORATIONS
RE-INSTATEMENT SECTION

P.O. BOX 6327

TALLAHASSEE, FL 32314

RE: G-R FISHERIES, INC
P 98000067194

TO WHOM IT MAY CONCERN:

AS DISCUSSED WITH MS. PATRICIA ASHTON, I REQUEST HEREBY THAT YOUR DEPARTMENT WAIVES THE FEES TO REINSTATE MY CORPORATION STATUS AS IT WAS INADVERTENTLY DISSOLVED. WHEN I CALLED TO FIND OUT, ON JANUARY 3RD, HOW TO OBTAIN A CURRENT CORPORATION CERTIFICATE OF GOOD STANDING AS IT WAS REQUESTED BY THE SMALL BUSINESS ADMINISTRATION, I WAS INFORMED BY DEBBIE (850-487-6950) THAT CORPORATION WAS DISSOLVED FOR NON-RENEWAL, AFTER RESEARCHING MY FILE SHE INFORMED ME THAT RENEWAL FORMS WERE RETURNED UNDELIVERED. WE LATER DETERMINED THAT THEY WERE SENT TO WRONG ADDRESS ON 25TH STREET INSTEAD OF 15TH STREET.

BEING OUR FIRST RENEWAL, AND IN ALL HONESTY, I DIDN'T KNOW THIS WAS A REQUIREMENT, IT WENT UNDETECTED.

I AM SENDING A RENEWAL FORM FOR EACH 1999 AND 2000 AND MY CHECK #1190 FOR 1999 AND MY CHECK #1191 FOR THE YEAR 2000, BOTH FOR \$150.00 EACH TO COVER RENEWAL FEES FOR EACH OF THOSE TWO YEARS. I AM ALSO SENDING A COPY OF SBA'S REQUEST LETTER AND I WILL MAIL A CERTIFICATE OF GOOD STANDING REQUEST AS SOON AS YOUR DEPARTMENT UPDATES MY FILE.

THANK YOU FOR YOUR PROMPT HANDLING OF THIS MATTER.

Rosa O. Tejeda
ROSA O. TEJEDA