

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



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

FILED

00 FEB 21 AM 10:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 998000096859

1. Corporation Name

Elite Wholesale Foods Inc

2. Principal Office Address

4980 SW 52 st.

Suite, Apt. #, etc.

suite - 113

City & State

Davie FL

Zip

33314

Country

3. Mailing Office Address

4980 SW 52 street

Suite, Apt. #, etc.

Suite - #113

City & State

Davie FL

Zip

33314

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11-01-98

5. FEI Number

65-0887995-061712

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

SP

05/04/99 90147 039 @ 150.00

7. Name and Address of Current Registered Agent

Name

NICHOLAS W. ROMANELLO

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

633 SOUTH FEDERAL HIGHWAY

Suite, Apt. #, Etc.

SUITE 800

City

FONT LAUDERDALE

State

FL

Zip Code

33301

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

Nicholas W. Romanello

REGISTERED AGENT MUST SIGN

Date 1-31-00

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	Craig A. Ray	4817 NW 82 Ave	Landerhill, FL 33351
			300003155723--1
			-03/03/00--01007--016
			****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:

Craig A Ray
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/16/00

Daytime Phone #

954-327-9000

CR2E081 (9/99)

ELITE WHOLESALE FOODS INC.

P98000096859

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4980 SW 52 Street
Suite 113
Davie FL 33314

Phone 954/327-9000
Fax 954/327-1111

January 26, 2000

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

Dear Sirs

In April of 1999, we filed our Corporation papers and sent in a check for the filing fee. The check was cashed (see attached), however the form was returned to us for lack of FEI number. We did have an assigned FEI number, but had missed the space on the form. When we received the form back for correction, it was filled out and returned within the 30 day period allotted. Having received no further communication on the matter, we assumed that all was in order. Our attorney informed us of our Corporation status, and that's how we discovered that there was a problem. As we did file our form on time, and we did possess a FEI number, and the check was cashed, I am asking you to please waive the reinstatement fees and accept the enclosed one hundred fifty dollar check as payment for the year 2000.

Sincerely,

Craig Ray

Craig Ray