

2007 FOR PROFIT CORPORATION REINSTATEMENT

10/2

FILED

2007 OCT 16 PM 3:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



10102007 REIN-P CR2E098 (1/07)

4. FEI Number **65-0886383** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARRERA, LESLIE
29336 SAM WAY
PUNTA GORDA, FL 33982

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
City _____ FL Zip Code _____

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Leslie J Barrera
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

10/10/07
DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2008, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **BARRERA, REYNALDO**
STREET ADDRESS **29336 SAM WAY**
CITY-ST-ZIP **PUNTA GORDA, FL 33982**

TITLE **VP** ☐ Delete
NAME **BARRERA, LESLIE J**
STREET ADDRESS **29336 SAM WAY**
CITY-ST-ZIP **PUNTA GORDA, FL 33982**

TITLE _____ ☐ Delete
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE _____ ☐ Delete
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE _____ ☐ Delete
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE _____ ☐ Delete
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE _____ ☐ Change ☐ Addition
NAME **200110864752**
STREET ADDRESS **10/16/07--01059-002**
CITY-ST-ZIP *****00.00**

TITLE _____ ☐ Change ☐ Addition
NAME _____
STREET ADDRESS **7/11/07 60186 025 67.00**
CITY-ST-ZIP _____

TITLE _____ ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE _____ ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE _____ ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

TITLE _____ ☐ Change ☐ Addition
NAME _____
STREET ADDRESS _____
CITY-ST-ZIP _____

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: Leslie J Barrera VP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/16/07 863-491-1436
Date Daytime Phone #

10/10/07

Division of Corporation:
To whom it may concern,

I Jeshu Barner the Register Agent and owner of Barner Harvesting is writing this letter to explain why I am sending \$80 for my Corporate filing fee for 2007.

When the Department sent out the renewal card in May I was in the Hospital and out of my office for over 2 months. When I returned to work I realized I had not paid the fee I went on line to pay. Somehow I ended up paying \$70.00 for a New Corporation not the Renewal fee. So I called and spoke with someone @ 850-245-6056 and explained what happened.

They told me to write what happened and send the letter with the Re-Instatement app. & a check for \$80 (the diff).

Thank you so much for understanding. If you have any questions please call me @ 813-219-1436.

Thank again Jeshu Barner