

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

FILED

02 JUL 18 PM 1:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P99000004769**

1. Corporation Name

**PAC OF COLLIER, INC.**

2. Principal Office Address

**40 LA HISPANA MEAT MKT.  
1802 40TH TERR. SW**

Suite, Apt. #, etc.

City & State

**NAPLES FL**

Zip

**34116**

Country

**USA**

3. Mailing Office Address

**1802 40TH TERR. SW**

Suite, Apt. #, etc.

City & State

**NAPLES, FL**

Zip

**34116**

Country

**USA**

4. Date Incorporated or Qualified  
To Do Business in Florida

**1-14-1999**

5. FEI Number

**59-3551371**

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

**ARMANDO CABRERA**

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

**1802 40TH TERR SW**

Suite, Apt. #, Etc.

City

**NAPLES**

State  
**FL**

Zip Code

**34116**

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

**Jose G. Cabrera**

REGISTERED AGENT MUST SIGN

Date

**7-16-2002**

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
P/D	MARIA CABRERA	1802 40TH TERR. SW	NAPLES, FL 34116
V/S	ARMANDO CABRERA	1802 40TH TERR. SW	NAPLES, FL 34116
T/D			

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:

**Jose G. Cabrera**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**7-16-2002**

Daytime Phone #

PAC of Collier, Inc.  
c/o La Hispana Meat Market, Inc.  
1802 40<sup>th</sup> Terrace SW  
Naples, FL 34116

July 16<sup>th</sup>, 2002

Department of State  
Division of Corporations  
Reinstatements Section  
PO Box 6327  
Tallahassee, FL 32314

RE: Pac of Collier, Inc. doc number p99000004769, reinstatement

Dear Division of Corps.:

We were recently informed that our Corporation was dissolved as of 9/21/2001.

Upon our investigating this situation we found that on our last report filed 5/31/2002 with the state for 2000 Uniform Business Report we had changed the mailing address. We checked the web site today and it showed the old address prior to 5/31/2000. We never received the 2001 or 2002 UBR from the State.

Under the these circumstances, we ask that the penalties fees be waived. We are enclosing a check in the amount of \$300.00 for the UBR fees for 2001 and 2002.

Sincerely,



J. Armando Cabrera  
Vice President  
PAC of Collier, Inc.