

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 JAN 10 PM 12:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000013267

1. Corporation Name

STUART FOODS, INC.

2. Principal Office Address

3500 S.E. Federal Hwy.

Suite, Apt. #, etc.

City & State

Stuart, FL

Zip

34997

Country

US

3. Mailing Office Address

3500 S.E. Federal Hwy.

Suite, Apt. #, etc.

City & State

Stuart, FL

Zip

34997

Country

US

REINSTATEMENT

12-10-03 01071 007 \$1,200.00

4. Date incorporated or Qualified
To Do Business in Florida

02/10/99

5. FEI Number

65-0934177

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Name and Address of Current Registered Agent

Name
Donald Kohlhorst

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

3500 S.E. Federal Highway

Suite, Apt. #, Etc.

City

Stuart

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

Donald E. Kohlhorst

REGISTERED AGENT MUST SIGN

Date 1-4-05

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

TITLES	Name of Officer and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Donald Kohlhorst	3500 SE Federal Highway	Stuart, FL 34997
VD	S. James Tringali	902 Clint Moore Road, #126	Boca Raton, FL 33487
S	Eleanor Zaccagnini	902 Clint Moore Road, #126	Boca Raton, FL 33487
TD	John M. Tringali	902 Clint Moore Road, #126	Boca Raton, FL 33487

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 corporation 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)(b), 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: *Donald E. Kohlhorst* (DONALD E. KOHLHORST)

Date 1-4-05

772-283-2397
Daytime Phone #