

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 OCT 14 PM 1:07

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P99000031807

1. Corporation Name

NICO'S SEAFOOD CORPORATION

**REINSTATEMENT 03**

000023797900  
10/14/03--01089--025 \*\*150.00

2. Principal Office Address

13860 SW 100 LANE

3. Mailing Office Address

13860 SW 100 LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33186

Country

USA

Zip

33186

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

04/07/99

5. FEI Number

65-0338967

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

GATICA, MARIO

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

13860 SW 100 LANE

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33186

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

**Sign Here**  
REGISTERED AGENT MUST SIGN

Date 10/06/2003

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
PTD	ARENAS, MARIA V	13860 SW 100 LANE	MIAMI, FL 33186
VSD	BARRIOS, MARKO G	13860 SW 100 LANE	MIAMI, FL 33186

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

*Marko Barrios*

**Sign Here**

10/06/03

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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CR2E081 (10/02)

Miami, Florida  
October 6, 2003

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: P99000031807  
NICO'S SEAFOOD CORPORATION  
13860 SW 100 LANE  
MIAMI, FL 33186

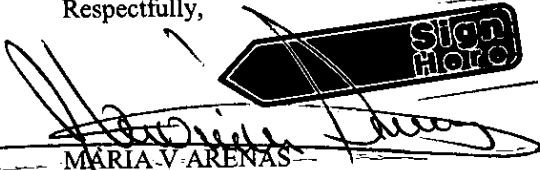
To Whom It May Concern:

Upon our conversation I am enclosing the Corporation Reinstatement Form due to the fact that I never received the Annual Report to be filed this year.

As per your request I'm enclosing the form with the \$150.00 fee and requesting to your office waive the penalties incurred in this situation.

Thank you for your help and I hope that this can solve this matter and avoid further penalties.

Respectfully,

  
MARIA V. ARENAS  
President

Sign  
Here