

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 17 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

ALIBAR INC

2. Principal Office Address

1125 DUVAL STREET

Suite, Apt. #, etc.

3. Mailing Office Address

21 KEY HAVEN TERRACE

Suite, Apt. #, etc.

City & State

KEY WEST FL

City & State

KEY WEST FL

Zip

33040

Country

USA

Zip

33040

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

8/10/98

5. FEI Number

65-0939634

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

BARTON T. IROFFMAN

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

21 KEY HAVEN TERRACE

Suite, Apt. #, Etc.

City

KEY WEST

State
FL

Zip Code

33040

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 10/16/02

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	ALICE WINGARDEN	3930 S. W. 5TH AVE N401	KEY WEST FL 33040
VP	BART IROFFMAN	21 KEY HAVEN TERR	KEY WEST FL 33040

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARTON T. IROFFMAN

10/16/02

Date

305 292 2092
Daytime Phone #

CR2E081 (9/01)

2012

Alibar Incorporated
dba Alice's at La te da
1125 Duval Street, Key West, FL 33040
Restaurant: (305) 296-6706 ext 39
Office: (305) 292-2092

Date: Wednesday, October 16, 2002

To: Whom it may concern

From: Bart Hofford,
Owner/Vice President
Alibar Incorporated

Re: Reinstatement of Alibar Inc. (65-0939634)

Documents necessary to keep Alibar Incorporated active were not received this year. Additionally, documents needed to keep Barton T Hofford Consulting of Florida Incorporated active were also not received at the same address. Should you need any further information, please contact me at (305) 292-2092.

Sincerely,


Barton T Hofford