

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC 19 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S 62296**

1 Corporation Name

RAGHU VIR FOODS CORPORATION

Principal Place of Business

**11 NE 58TH AV
OCAIA, FL 34470**

Mailing Address

**3386 SE 54TH AV
OCAIA, FL 34471**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2 New Principal Office Address, If Applicable

3 New Mailing Address, If Applicable

3386 SE 54TH AV

4 Date Incorporated or Qualified
To Do Business in Florida

05/14/91

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5 FEI Number

59-3066695

Applied For

Not Applicable

City & State

City & State

OCAIA FL 34471

Zip

Country

Zip

34471

Country

USA

6 CERTIFICATE OF STATUS DESIRED ☒

Additional Fee required
for Certificate of Status

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

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
	PSTD PAVASIA, Rekha J.	3386 SE 54TH AV	OCAIA, FL 34471

**200002039242--7
-12/27/96--01054--015
****383.75 ****383.75**

REINSTATEMENT

8. Name and Address of Current Registered Agent

**REKHA J. PAVASIA
3386 S.E. 54TH AV
OCAIA, FL 34471**

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City State Zip Code
FL

10 I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

RJ Pavasia

REGISTERED AGENT MUST SIGN

Date **12/12/96**

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

RJ Pavasia
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/12/96 352 6947004
Date Daytime Phone #

CR2E040 (12/95)