

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT



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

APPROVED AND FILED

1997 DEC 19 PM 12:22
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **V08242**

1. Corporation Name
AMERICAN FOOD MANUFACTURING CORP.

Principal Place of Business 1781 W. 32ND PLACE HIALEAH FL 33012 US	Mailing Address P.O. BOX 52-4183 MIAMI FL 33152-4183 US
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01/21/1992	
City & State		City & State		5. FEI Number 65-0360762	
Zip		Zip		Applied For	
Country		Country		Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
CTD	RIVERO, JORGE H.	CLUB ATLANTIS-2555 COLLINS AVE., 2406	MIAMI BEACH FL 33140
PSD	RIVERO, JUAN CARLOS	433 W 45TH PLACE	MIAMI FL 33188 HIALEAH FL 33012
VD	RIVERO, JORGE H. JR.	CLUB ATLANTIS-2555 COLLINS AVE., 2206	MIAMI BEACH FL 33140
VD	RIVERO JOSEFINA	CLUB ATLANTIS 2555 COLLINS AVE. 2406	MIAMI BEACH FL 33140

REINSTATEMENT *12/19/97*

8. Name and Address of Current Registered Agent

JUAN C. RIVERO
 7335 N.W. 31TH STREET
 MIAMI FL 33122-1240

9. Name and Address of New Registered Agent

Name **900002380099-9**
 -12/23/97-01025-007
 Street Address (P.O. Box Number is Not Applicable) **758.75 ***758.75**
 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 *Juan C. Rivero*
 REGISTERED AGENT MUST SIGN

Date **11-21-97**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

(See other side for information on Intangible tax.)

12. 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: *Juan C. Rivero* **JUAN CARLOS RIVERO 10-31-97 884-1884**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/97)