

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**APPLICATION
FOR
REINSTATEMENT**



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

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**

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

01/21/1992

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0360762

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☒ \$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 |
|---------------|---|--|--|
| CJD | 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

[Signature]

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUAN CARLOS RIVERO

Date

10-31-97

Daytime Phone #

884-1884

CR2040 (8/97)