

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

page 102

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 APR 14 PM 2:47

DOCUMENT # V 24451

1. Corporation Name

BENATOVICH PRODUCE INC.

2. Principal Office Address

4101 SANCTUARY

Suite, Apt. #, etc.

LANE

3. Mailing Office Address

4101 SANCTUARY LANE

Suite, Apt. #, etc.

City & State

BOCA RATON FL

City & State

BOCA RATON FL

Zip

33431

Country

USA

Zip

33431

Country

USA

700073720177  
05/02/06--01044--013 \*\*300.00  
CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

1992

5. FEI Number

650323807

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

TED BENATOVICH

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

4101 SANCTUARY LANE

Suite, Apt. #, Etc.

City

BOCA RATON FL

State  
FL

Zip Code

33431

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

Ted Benatovich

PRES

Date

4/5/06

REGISTERED AGENT MUST SIGN

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
<u>PRES.</u>	<u>TED BENATOVICH</u>	<u>4101 SANCTUARY LANE</u>	<u>BOCA RATON FL 33431</u>

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 contained in Chapter 119, 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:

Ted Benatovich  
TED BENATOVICH PRES.

4/5/06

Date

Daytime Phone #

561-361-4102



BENATOVICH  
PRODUCE  
INC.

4/4

Page 2 of 2

We did not receive a renewal  
for 2005; so I'm paying 150<sup>00</sup> for  
reinstatement & 150<sup>00</sup> for 2006.

Pls put our listing back up on  
your web site so our bank can see  
that we are reinstated.

Thanks

Ted Benatovich, Pres.