

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra S. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED

OCT 27 PM 2:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000097489

1. Corporation Name

TRANSWORLD ENTERPRISES, INC.

Principal Place of Business Mailing Address
153 E Palmetto Pk, Rd 153 E Palmetto Pk Rd
Ste 129 Ste 129
Boca Raton, FL 33432 Boca Raton, FL 33432

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

2. New Principal Office Address, If Applicable 160 West Camino Real Suite, Apt. #, etc. Suite 145 City & State Boca Raton, FL Zip 33432		3. New Mailing Office Address, If Applicable the same Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida 12/27/95	
				5. FEI Number Applied For <input checked="" type="checkbox"/> Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input 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
DPST	Mackey, J A	160 West Camino Real Suite 145	Boca Raton, FL 33432

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****150.00 ****150.00
SP

8. Name and Address of Current Registered Agent

AmeriLawyer Chartered
343 Almeria Avenue
Coral Gables, FL 33134

9. Name and Address of New Registered Agent

Name
Spiegel & Utrera, P.A.
Street Address (P.O. Box Number is Not Acceptable)
343 Almeria Avenue
Suite, Apt. #, Etc.
City
Coral Gables
State
FL
Zip Code
33134

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 BY: Spiegel & Utrera, P.A.

Natalia Utrera, VICE PRESIDENT

Date 10/22/99

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: James A Mackey Jr J A Mackey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/20/99 (561) 393-7108
Date Daytime Phone #

CR20040 (1/98)