

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 17 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000050386**

1. Corporation Name

PHOENIX AVIATION SERVICES, INC.

Principal Place of Business

Mailing Address

18601 S.W. 210TH STREET
MIAMI FL 33187

18601 S.W. 210TH STREET
MIAMI FL 33187



REINSTATEMENT 03

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. | | 05/19/1997 | |
| City & State | | City & State | | 5. FEI Number | |
| Zip | | Country | | 65-0753543 | |
| | | | | Applied For | |
| | | | | 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 | 4 City / State / Zip |
|------------|-------------------------------------|--|---|
| D | TIRADO, VINCENT | 18601 SW 210 ST | MIAMI FL 33187 |
| | | | 400023915024 10/17/03--01089--019 **150.00 |
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| | | | |
| | | | |

| | | | |
|---|--|--|-------|
| 8. Name and Address of Current Registered Agent | | 9. Name and Address of New Registered Agent | |
| PLOUCHA, L.M. ESQ. C/O ATKINSON, DINER, STONE & MANKUTA, P.A. 1946 TYLER STREET HOLLYWOOD FL 33020 | | Name | |
| | | Street Address (P.O. Box Number is Not Acceptable) | |
| | | Suite, Apt. #, Etc. | |
| | | City | State |
| | | 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. or 617.0505, F.S.

Signature of Registered Agent *Vincent Tirado* Date 10/15/03
REGISTERED AGENT MUST SIGN

11. 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: *Vincent Tirado* VINCENT TIRADO Date 10/15/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E040 (7/03)



**PHOENIX
AVIATION SERVICES, INC.**

18601 S.W. 210 STREET
MIAMI, FLORIDA 33187
(305) 252-4057
FAX (305) 251-3054

October 13, 2003

Division of Corporations
Annual Report/Reinstatement Section
P. O. Box 6327
Tallahassee, Fl. 32314-6327

RE: Phoenix Aviation Services, Inc.
FEI#65-0753543

Gentlemen:

I wish to advise you that the UBR Notice for 2003 for the referenced corporation was never received. Enclosed is the application for reinstatement together with the necessary Fee.

Respectfully,

Vincent Tirado