

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

AND  
FILED

00 MAR 27 AM 8:45

DOCUMENT # P. 98000 103652

1. Corporation Name

Rapid Auto Sales & Service, Inc.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

9793 South Orange  
Blossom Trail, Suite 2  
Orlando FL 32837

SAME

600003203076--3

-04/11/00--01052--004

\*\*\*\*900.00 \*\*\*\*900.00

600003203076--3

-04/11/00--01052--005

\*\*\*\*\*8.75 \*\*\*\*\*8.75

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

12/11/9

5. FEI Number

59-3558794

Applied For

Not Applicable

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
Director Pres.	Fabian Cortez	1227 Wilson Rd.	Orlando FL 32837

REINSTATEMENT

19-09  
JMM

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LAWRENCE M. Fuchs Esq.  
590 Royal Palm Beach Blvd.  
Royal Palm FL 33411

Name

Fabian Cortez

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

1227 Wilson Rd

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32837

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

2/25/2002

11. This corporation owes 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]*

President

2/25/2002

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407/308.4159

CRZE081 (12/98)