PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

550655

1. Corporation Name

LAND TRUCK BROKERS, INC.

Principal Place of Business

Mailing Address

U S ROUTE 27 BRANFORD FL 32008

U S ROUTE 27 BRANFORD FL 32008 A 180181 BHBI BAN BONG BNBI BNBI BNI BNI BN

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SECRETARY OF STATE TALLAHASSEE FLORIDA

PEMSTATEMENT 02

If above	addresses are incorrect in any way, line	through incorrect	information a	nd enter correction below,	REMS	STATEME	NTO	2	
2. New Principal Office Address, If Applicable 3.			3. New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 11/03/1977			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5 EEI Mumbar				
City & Stat	te	City & State	City & State		59-1818469			Applied For Not Applicable	
Zip	Country	Zip		Country	6. CERTIFICATE	OF STATUS DESIRED	\$8.75 Additi	onal Fee required ficate of Status	
7. Names	and Street Addresses of Each Officer ar	nd/or Director (Fl	orida nonprofi	t corporations must list at le	ast 3 directors)			<u> </u>	
Title(s) 1	Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip			
D	LAND, RAYMON J		US HWY 27			BRANFORD, FLORIDA 00000			
SD	LAND, ANNETTE B		US HWY 27			BRANFORD, FLORIDA 00000			
				****			<u>.</u>		
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•					11/05/0	0008 7951 0201012024	JE4 **758.	. 75	
	8. Name and Address of Curren	t Registered Age	ent		9. Name and A	ddress of New Registere	trank he		
LAND, RAYMON J U S ROUTE 27				Street Address (P.O. Box Number is Not Acceptable)					
BRANF	ORD FL 32008			Suite, Apt. #, Etc		Sta	ite Zip Cod		
10. I, being	appointed the registered agent of the ab	pove named corpo	oration, am far		bligations of Section	F	Li		
Signature of Registered A	Agent <u>(Wireller)</u>	TBP EGISTERED AG	ENT MUST S	2018/20 IGN		Date 10/27	102		
11. I certify t	that I am an officer or director or the rece	eiver or trustee em	nowered to e	vecute this application as a	royldad for in the	***************************************		·	

1. 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 reinstaterment 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/27/02

935-1865 3<u>86 935-</u>0824

Daytime Phone #

LAND TRUCK BROKERS, INC.

P.O. Box 394 -- Branford, Florida 32008 OFFICE: (386) 935-1865 - 1 (800) 782-7211 FAX: (386) 935-3539

Mar 1, 2002

Please see if you show an anual report heing mailed. It lashs like We are only receiving this last report.

Thanks for this notice we are a certificate of Status.

Linnelle B. Fund See D.

