PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

APPLICATION FOR REINSTATEMENT

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

FILED
01 OCT 19 PM 5:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **623482**

1. Corporation Name

4126 INC.

Principal Place of Business	Mailing Address
4126 SW 47 AVENUE FT. LAUDERDALE FL 33314	4126 SW 47 AVENUE FT. LAUDERDALE FL 33314

2001 UBR

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
4343 S. State Rd. 7	4343 S. State Rd. 7
Suite, Apt. #, etc.: Suite # 115	Suite, Apt. #, etc.: Suite # 115
City & State: Ft. Lauderdale, FL	City & State: Ft. Lauderdale, FL
Zip: 33314 Country: Broward	Zip: 333314 Country: Broward

4. Date Incorporated or Qualified To Do Business in Florida: 05/31/1979

5. FEI Number: 59-1924319 ☐ 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	DANIELLE, JOSEPH	6069 NW 87 AVE	PARKLAND FL 33067
VD	DANIELLE, MARIA	9292 CHELSEA DR SOUTH	PLANTATION FL
STD	DANIELLE, LINDA	6069 NW 87 AVE	PARKLAND FL 33067
T	DANIELLE, MICHAEL	6069 NW 87 AVE	PARKLAND FL 33067
		300004686233--7	-11/16/01--01105--016
			****150.00 ****150.00

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
DANIELLE, JOSEPH 4126 SW 47 AVE. DAVIE FL 33314	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

CR2E040 (8/01)

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: Joe Danielle Date: 10-15-01
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.

(954)

SIGNATURE: Joe Danielle 10-15-01 792-3880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2 of 2

M&L AUTO WRECKING & PARTS

4343 South State Road 7 • Davie, Florida 33314 • (954) 316-7557 • Fax: (954) 316-7552

October 15, 2001

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

Re: FEI Number: 59-1924319

Please be advised that we have changed our corporate office to the following location:

4126 Inc.
4343 S. State Rd. 7
Ft. Lauderdale, FL 33314

We apologize for not sending our payment as scheduled, but would like to advise that we have not been receiving all of our correspondence, since we changed offices, as per our telephone conversation as of today, please find Enclosed our check #69262 for the amount of $150.00.

Thanking you in advance for your cooperation.

Sincerely,

Marisela Escudero

Marisela Escudero