

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 FEB 19 PM 12:36

DOCUMENT # F01000003769

1. Corporation Name

World Express Shipping, Transportation and Forwarding
Services, Inc.

2. Principal Office Address

729 Route 83

3. Mailing Office Address

729 Route 83

Suite, Apt. #, etc.

Hartford Centre Suite No. 307

Suite, Apt. #, etc.

Hartford Centre Suite No. 307

City & State

Bensenville, Illinois

City & State

Bensenville, Illinois

Zip

60106

Country

USA

Zip

60106

Country

USA

800013693158

03/07/03--01051--015 **900.00

REINSTATEMENT 02-03

**4. Date Incorporated or Qualified
To Do Business in Florida**

July 17, 2001

5. FEI Number

36-3521800

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CT Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State
FL

Zip Code
33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Jeffrey R. Graves
Assistant Secretary

Date 2/14/03

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Director, President, Treasurer	Jean O. De Keyser, Jr.	2 South 755 Lakeside Drive	Glen Ellyn, Illinois 60137
Director	Francine Van Meenen	Noorderlann 89	2030 Antwerpen, Belgium
Director	John P. Morgan	4336 North Judd Avenue	Schiller Park, Illinois 60176
Director	Brian Buckholz	Hartford Centre, Ste. 307, 729 Rte. 83	Bensenville, Illinois 60106

10. 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:

Jean O. De Keyser, Jr.

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)