

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR

FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 DEC -6 PM 5:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F56250

1. Corporation Name

EXCLUSIVELY ALOHA, INC.

Principal Place of Business

Mailing Address

2250 N.W. 95 AVE.

2250 N.W. 95 AVE.

~~4231 SW 10TH STREET~~

~~4231 SW 10TH STREET~~

MIAMI 33 33172

MIAMI 33 33172

US

US

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



2001 UBR M

4. Date Incorporated or Qualified  
To Do Business in Florida

06/29/1984

5. FEI Number

59-2191335

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 3	City / State / Zip 4
PDV	GEGA, TERRY	2250 N.W. 95 AVE.	MIAMI

700004729807--3

12/16/01 01016 007

\*\*\*\*150.00 \*\*\*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GEGA, TERRY  
2250 N.W. 95 AVE.  
MIAMI FL 33172

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

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.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

12/28/01

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

TERRY G. GEGA 11-28-2001 (305)599-0436

TELEPHONES:  
DADE: (305) 599-0436  
BROWARD: (954) 525-7211



**ALOHA FREIGHTWAYS, INC.**

Transportation Services & Consultation  
2250 N.W. 95th AVENUE • MIAMI, FLORIDA 33172-2346

MAILING ADDRESS  
P.O. BOX 524295  
MIAMI, FLORIDA 33152-4295

November 28, 2001

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Document No. F56250  
FEI Number 59-2191335

Sirs:

In regard to your document dissolving the corporation, please be advised that this is the first renewal reminder form that was received in 2001.

If our record, since 1984, is checked; you will see that previous payments were always on time.

Taking this into account, we ask you to accept the enclosed check for \$150.00 to cover the corporation renewal fee and reinstate our status.

Sincerely,

Terry G. Gega, President

ALOHA FREIGHTWAYS, INC. and  
EXCLUSIVELY ALOHA INC.