

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *Page 1 of 2*

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 APR 21 AM 10:42

DOCUMENT # **F84310**

1. Corporation Name

*Export Machinery, Inc.*

000073901560

05/03/06--01030--013 \*\*150.00

2. Principal Office Address

*1635 Coconut Dr.*

3. Mailing Office Address

*Same*

Suite, Apt. #, etc.

*St. Landersdale*

Suite, Apt. #, etc.

*same*

City & State

*Florida*

City & State

*same*

Zip

*33315*

Country

*USA*

Zip

*same*

Country

*same*

4. Date Incorporated or Qualified  
To Do Business in Florida

*June 4, 1982*

5. FEI Number

*F84310 592199539*

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

*DONALD SIPLE*

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

*2036 NW 180 Ave.*

Suite, Apt. #, Etc.

City

*Bembroke Pine, FL*

State

*FL*

Zip Code

*33029*

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

*[Signature]*  
REGISTERED AGENT MUST SIGN

Date

*03-27-06*

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
<i>President</i>	<i>Anthony Vaccaro</i>	<i>1635 Coconut Dr.</i>	<i>St Landersdale FL 33315</i>
<i>Sec. Treas.</i>	<i>Louise Vaccaro</i>	<i>1635 Coconut Dr.</i>	<i>St Landersdale FL 33315</i>
<i>Treas</i>	<i>Louise Vaccaro</i>	<i>1635 Coconut Dr.</i>	<i>St Landersdale FL 33315</i>

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 contained in Chapter 119, 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:

*Louise Vaccaro*

*LOUISE VACCARO SEC. TREAS*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

*03-27-06*

Daytime Phone #

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FLORIDA DEPT. OF STATE  
DIVISION OF CORPORATIONS

MARCH 23, 2006

DEAR SIRs;

ENCLOSED PLEASE FIND REINSTATEMENT FORMS AND CHECK FOR \$150.00 DOLLARS, TO REINSTATE THE EXPORT MACHINERY CORPORATION.

WE DID NOT RECEIVE THE ANNUAL REPORT NOTICES FOR 2005. IT IS POSSIBLE THESE FORMS WERE MAILED TO OUR FORMER ADDRESS.

OUR CURRENT ADDRESS IS; EXPORT MACHINERY  
1635 S.W. COCONUT DRIVE  
FORT LAUDERDALE, FL. 33315

THANKING YOU IN ADVANCE, FOR YOUR HELP IN THIS MATTER,

YOURS TRULY.

*Louise Vaccaro*  
LOUISE VACCARO  
SECRETARY