

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 DEC -4 PM 1:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F96000006192

1. Corporation Name
OZINGA TRANSPORTATION SYSTEMS, INC.

Principal Place of Business
12843 S. PULASKI RD.
ALSIP IL 60658

Mailing Address
12843 S. PULASKI RD.
ALSIP IL 60658



REINSTATEMENT

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 21900 S. Central Ave Suite, Apt. #, etc.		3. New Mailing Office Address, If Applicable 21900 S. Central Ave Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 11/26/1996	
City & State Matteson, IL		City & State Matteson, IL		5. FEI Number 36-3506930	
Zip 60443		Country Cook		Applied For Not Applicable	
Zip 60443		Country Cook		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PDC DC	OZINGA, MARTIN III	12843 S. PULASKI RD. 21900 S. Central Ave	ALSIP IL 60658 Matteson, IL 60443
+	JOUSMA, RICHARD	12843 S. PULASKI RD. 21900 S. Central Ave	ALSIP IL 60658 Matteson, IL 60443
SD	OZINGA, RICHARD K	12843 S. PULASKI RD. 21900 S. Central Ave	ALSIP IL 60658 Matteson, IL 60443
+	WANDYKE, DONALD	12843 S. PULASKI RD.	ALSIP IL 60658
T	VAN DYK, DONALD L	21900 S. Central Ave	Matteson, IL 60443
D	OZINGA, JAMES A	12843 S. PULASKI RD. 21900 S. Central Ave	ALSIP IL 60658 Matteson, IL 60443

100002368891-3
-12/10/97--01114--022
****750.00 ****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PARKER, GEORGE 10091 SW 158 TERRACE MIAMI FL 33157-1644		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	State FL
		Zip Code	

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 Date 11/21/97
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on Intangible tax.)

12. 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: DONALD L. VAN DYK 11/17/97 708-720-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E040 (8/97)