

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

98 NOV 10 AM 11:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # J27947

1. Corporation Name

TRINFORWARDING INTERNATIONAL, INC.

~~1008-2455A~~

Principal Place of Business

Mailing Address

7303, N.W. 79TH TERRACE,  
MIAMI,  
FLORIDA 33166

REINSTATEMENT

0598

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

4. Date Incorporated or Qualified To Do Business In Florida

08/06/86

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2741267

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D/P	AZAD ALI	13700 NW 18 STREET	PEMBROKE PINES FL 33028
V/P	VERONICA ALI	13700 NW 18 STREET	PEMBROKE PINES FL 33028
S	SHANAZ ALI	2 NOEL STREET	COUVA, TRINIDAD
			900002686339--0 -11/12/98-01099-015 ***1200.00 ***1200.00
			900002686339--0 11/12/98-01099-015 *****8.75 *****8.75

8. Name and Address of Current Registered Agent

VERONICA ALI  
7303 NW 79TH TERRACE,  
MIAMI, FL 33166

9. Name and Address of New Registered Agent

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

*Veronica Ali*

Date

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:

VERONICA ALI

*Veronica Ali*

10/22/98

Date

305-887-9725

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2694C (1/98)

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