

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 JAN 12 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J67821

1. Corporation Name

R & R FORWARDERS, INC.

2. Principal Office Address

4462 NW 74TH AVE

Suite, Apt. #, etc.

3. Mailing Office Address

28401 S.W. 163RD AVE

Suite, Apt. #, etc.

City & State

MIAMI FLA 33166

Zip

33166

Country

City & State

HOMESTEAD FL 33033

Zip

33033

Country

4. Date Incorporated or Qualified
To Do Business in Florida

APRIL 13, 1987

5. FEI Number

59-2821491

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Name and Address of Current Registered Agent

Name

RONALD RODRIGUE

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

28401 S.W. 163RD AVE

Suite, Apt. #, Etc.

City

HOMESTEAD,

State

FL

Zip Code

33033

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

Ronald Rodrigue

RONALD RODRIGUE

Date **1-10-00**

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
PRES	RONALD RODRIGUE	28401 S.W. 163RD AVE	HOMESTEAD FL 33033
V PRES	LEROY RODRIGUE	28401 S.W. 163RD AVE	HOMESTEAD FL 33033
SECT	RONALD RODRIGUE	SAME	SAME

9 NEWS JAN 20 2000

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:

Ronald Rodrigue

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONALD RODRIGUE

Date

1-10-00
Daytime Phone #

(305) 477-5217