

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

98-99

FILED

99 JAN 20 AM 10:37

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **L68634**

1. Corporation Name

TROPICAL AUTO SALES OF HIALEAH, INC.

Principal Place of Business	Mailing Address
% MIRTHA RODRIGUEZ 578 E. 9TH ST. HIALEAH FL 33010	% MIRTHA RODRIGUEZ 578 E. 9TH ST. HIALEAH FL 33010

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04/25/1990	
City & State		City & State		5. FEI Number	
Zip		Country		65-0188207	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input 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
PST	RODRIGUEZ, MIRTHA	400 SE 5TH ST.	HIALEAH FL 33010

700002752017--3
 -01/22/99--01104--008
 ****300.00 ****300.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
RODRIGUEZ, MIRTHA 578 E. 9TH ST. HIALEAH FL 33010		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: *Mirtha Rodriguez* **REQUIRED** 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: *Mirtha Rodriguez* **REQUIRED** Date: _____ Daytime Phone #: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E040 (9/98)



Tropical Auto Sales of Hialeah

January 13, 1999

Florida Department of State
Division of Corporations
Annual Reports Section
P.O. Box 6327
Tallahassee, FL 32314

Ref.: Tropical Auto Sales of Hialeah, Inc.
L68634


Dear Sir (Madam):

I called your office and spoke to Mr. Shaun Logan who explained to me that for this year the penalty would be waived if I explained in writing that I had not receive my Annual Report.

I did not receive my Annual Report. The reason is as follows: In order to minimize expenses from November 1997 to July 15, 1998, my business address was 3283 East 10 Ave., Hialeah, Florida 33013. I had arranged with the post office to have my mail forwarded and asked the new occupant to notify me if they received any of my mail but despite these precautions the Report was lost. I did receive your Application For Reinstatement since I returned to my original location.

Enclosed please find my Corporation Annual Report-Application For Reinstatement and a check for \$300. Thank you very much for your cooperation and please accept my apology for this inconvenience.

Sincerely,


Mirtha Rodriguez-President