


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
 Secretary of State  
 DIVISION OF CORPORATION

**2001 UBR**

**FILED**

01 NOV 30 PM 5:00

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT #** L77639

**1. Corporation Name**  
 CETMA JET, INC.

<b>2. Principal Office Address</b> 10200 Old Cutler Rd.		<b>3. Mailing Office Address</b> 10200 Old Cutler Rd.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
<b>City &amp; State</b> Miami, Florida		<b>City &amp; State</b> Miami, Florida	
<b>Zip</b> 33156	<b>Country</b> US	<b>Zip</b> 33156	<b>Country</b> US

**4. Date Incorporated or Qualified To Do Business in Florida** 05/31/1990

<b>5. FEI Number</b> 65-0209399	<b>Applied For</b> Not Applicable
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**6. CERTIFICATE OF STATUS DESIRED**  \$8.75 Additional Fee required for a Certificate of Status

**7. Name and Address of Current Registered Agent**

<b>Name</b> R. Lawrence Bonner, Esq.		100004720261-8	
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 100 SE 2nd Street		-12/12/01-01013-025 ****150.00 **** 50.00	
<b>Suite, Apt. #, Etc.</b> 3400		ILLS	
<b>City</b> Miami	<b>State</b> FL	<b>Zip Code</b> 33131	

**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** \_\_\_\_\_ **REGISTERED AGENT MUST SIGN** **Date** 10/19/01

**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
DP	Betancourt, Hector J.	10200 Old Cutler Rd.	Miami, FL 33156
ST	Betancourt, Monica S.	10200 Old Cutler Rd.	Miami, FL 33156
V	Martin, Ernesto R.	7911 LOS PINOS CIRCLE <del>10200 Old Cutler Rd.</del>	CORAL GABLES, FL 33143 Miami, FL 33156

**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)(f), 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:** H.T. Bonner **Date** 10/22/01 **Daytime Phone #** (305) 667-6059

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR22601 (8/00)

2002

## Cetma Jet, Inc.

10200 Old Cutler Road  
Miami, Florida 33156

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Telephone 305.667.6059

October 19, 2001

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

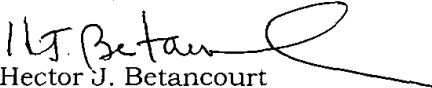
Re: Cetma Jet, Inc.

Dear Sir or Madam:

Cetma Jet, Inc. did not receive the 2001 annual business report. However, Cetma Jet, Inc. did receive a Certificate of Administrative Dissolution or Revocation. We do not have any record of receiving the annual report and are therefore asking for a waiver of the reinstatement fee of \$750. We are enclosing a corporation reinstatement form for Cetma Jet, Inc., along with a check in the amount of \$150.00. Please note that the principal place of business and the mailing address for Cetma Jet, Inc. has changed to 10200 Old Cutler Road, Miami, Florida 33156 and is no longer 100 SE 2<sup>nd</sup> Street, Miami, Florida 33131.

Please call if you any questions.

Very truly yours,

  
Hector J. Betancourt

Enclosures

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