

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 18 PM 5:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # n02000006960

1. Corporation Name

EXPRESS SECURITY AND SERVICES, INC.

2. Principal Office Address

18800 N.W. 2ND AVENUE

3. Mailing Office Address

1410 S.W. 87TH TERRACE

Suite, Apt. #, etc.

206

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

PEMBROKE PINES FL

Zip

33169

Country

DANE

Zip

33025

Country

BROWARD

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

65-0992137

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CELESTINE PASSLY

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

1410 S.W. 87TH TERRACE

Suite, Apt. #, Etc.

City

PEMBROKE PINES,

State
FL

Zip Code
33025

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

Celestine Passly
REGISTERED AGENT MUST SIGN

Date 11/14/03

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
P	CELESTINE PASSLY	1410 S.W. 87TH TERRACE	PEMBROKE PINES, FL 33025

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:

Celestine Passly
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/14/03
Date

Daytime Phone #

CR2001 (10/02)

2072

November 14, 2003

Celestine Passley
18800 N.W. 2nd Ave #206
Miami Fla 33169

Department of State
Division of Corporations
409 E. Gaines St
Tallahassee, Fla 33214

Re: Reinstatement of Corporation.

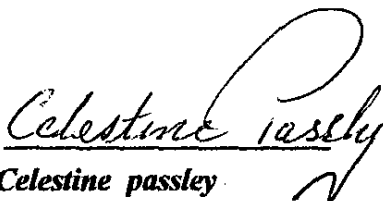
To whom it may concern.

I am asking that my Corporation be reinstated, bast on the fact that I did mail my renewal fee, early this year, but I did not know it was returned because the application was not mail, you only received the check for \$150.00. I din not receive a returned letter from your. I don't know why.

I was told by one of your officer to write this letter of explanation and send \$150.00 to be reinstated. Here is my money order in the amount of \$150.00 One hundred & fifty dollars.

Thanks in advance for your kind cooperation in this matter. Should you have any questions, please do not hesitate to contact me at (305) 651-3344 .

Sincerely


Celestine passley
Directoe