


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P00000042435**

1. Corporation Name

EXPRESS TOUR & TRAVEL, INC.

Principal Place of Business

**7021 GRAND NATIONAL DR #110
ORLANDO FL 32819**

Mailing Address

**7021 GRAND NATIONAL DR #110
ORLANDO FL 32819**

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/27/2000

5. FEI Number

59-3646187

Applied For

Not Applicable

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	4 City / State / Zip
D	ABDUL, SALEH M	7021 GRAND NATIONAL DR #110	ORLANDO FL 32819

500004687685--5

-11/19/01--01066--027

******150.00 ****150.00**

8. Name and Address of Current Registered Agent

**ABDUL, SALEH
7021 GRAND NATIONAL DR #110
ORLANDO FL 32819**

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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




REGISTERED AGENT MUST SIGN

Date **10/15/01**

11. 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:

 **Abdul Saleh M**

10/15/01

407 3520055

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



EXPRESS TOUR & TRAVEL

Department of state
Division of Corporation

Ref: Reinstatement Doc# P00000042435

To whom it may concern.

just to let you know that we never
received any notice or even a reminder
before, also we were not aware of that
renewal because it is our first year for
this Corporation.

Due to the bad situation that all travel
business is going through, we kindly asking
to take this in consideration and wave the
penalty.

Thank

Saleh Abdul

Saleh 10-15-01

7021 GRAND NATIONAL DR
SUITE # 110
ORLANDO, FL 32819

PHONE: (407) 352-0055
FAX: (407) 352-0713