

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

01 SEP -4 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000056158

1. Corporation Name

TRANSCONTINENTAL OF U.S.A., INC

2. Principal Office Address

1301 E. OAKLAND PARK BLVD

Suite, Apt. #, etc.

200

City & State

FORT LAUDERDALE, FL

Zip

33334

Country

USA

3. Mailing Office Address

1301 E. OAKLAND PARK BLVD

Suite, Apt. #, etc.

200

City & State

FORT LAUDERDALE, FL

Zip

33334

Country

USA

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

5. FEI Number

65-0192373

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DAN W. JONES

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

1301 E. OAKLAND PARK BLVD

Suite, Apt. #, Etc.

SUITE # 200

City

FORT LAUDERDALE

900004575669

-09/07/01--01099--011

****150.00 ****

LS

State
FL

Zip Code

33334

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**

Dan W. Jones
REGISTERED AGENT MUST SIGN

Date

8/28/01

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
PRES	DAN W. JONES	1301 E. OAKLAND PARK BLVD # 200	FORT LAUD, Fla. 33334

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:

Dan W. Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/25/01

Daytime Phone #

(954) 763-789

202

TRANSCONTINENTAL OF USA, INC
1301 E. OAKLAND PARK BLVD SUITE 200
FORT LAUDERDALE, FLORIDA 33334

PH # 954-7763-7339

August 25, 2001

Florida Department of State
ATT: Katherine Harris
Secretary of State

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Dear Ms. Harris

In RE: My UBR Doc # P00000056158

Please find enclosed my year 2001 Uniform Business Report (Reinstatement), and a check for the amount of \$150.00.

We never received the forms and while our Accountant was updating our records today he found that we were not active with the Dept. of State. Therefore this letter to you and we hereby request that you abate any penalties.

Sincerely Yours



Dan W. Jones
Corp. President