

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

11 DEC -9 PM 12:52

DATE RECEIVED

DOCUMENT #P00000068490

1. Corporation Name

ROSS AND SON QUALITY TRUCKING INC

2. Principal Office Address - No P.O. Box #

113 SW 3 AVE

3. Mailing Office Address

8745 SW 160 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HOMESTEAD FL

City & State

MIAMI FL

Zip

33030

Country

USA

Zip

33157

Country

USA

REINSTATEMENT

09-11

CR2E081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida

7/18/2000

5. FEI Number

65-1028560

☐ 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

YVONNE ROSS

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

8745 SW 160 ST

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33157

~~800215044538~~
~~12/09/11-01031-016 **1050.00~~
~~12/09/11-01031-016 **1050.00~~

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

Yvonne Ross

REGISTERED AGENT MUST SIGN

Date **12/02/2011**

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	YVONNE ROSS	8745 SW 160 ST	MIA. FL 33157

10. E-mail Address: **winkaservice@comcast.net**

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

Yvonne Ross

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/02/2011 7863440465

Date

Daytime Phone #

Rg262

ROSS AND SON QUALITY TRUCKING INC
8745 SW 160 ST
MIAMI FL 33157

DIVISION OF CORPORATION
PO BOX 6327
TALLAHASSEE FL 32314

RE DOCUMENT # P00000068490

I HEREBY REQUEST THE REINSTATE OF THE ABOVE DOCUMENT NUMBER. I
ALSO STATE THAT THE DOCUMENT # P11000062075 WHICH IS CURRENTLY
INACTIVE AND THE RIGHTS OWNED BY THE SAME COMPANY HAS BEEN
VOLUNTARILY DISSOLVED IN ORDER TO RE INSTATE THE CORRECT
CORPORATION.

YOUR ASSISTANCE IS APPRECIATED


YVONNE ROSS
ROSS AND SON QUALITY TRUCKING INC