

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 JUN -7 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000072127

1. Corporation Name

LOGISTIC TRANSIT INC

2. Principal Office Address

7220 NW 36th STREET

Suite, Apt. #, etc.

Suite 504

City & State

MIAMI FLORIDA

Zip

33166

Country

USA

3. Mailing Office Address

7220 NW 36th Street

Suite, Apt. #, etc.

Suite 504

City & State

MIAMI FLORIDA

Zip

33166

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/28/00

5. FEI Number

65-1027660

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

JAIRO A SANDOVAL

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

4069 HOLLY COURT

Suite, Apt. #, Etc.

City

WESTON

State
FL

Zip Code
33331

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 **06-06-02**

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	JORGE A ARIAS	7220 N.W. 36th STREET SUITE 504 ^F	MIAMI FL 33166
D	ALICIA ARIAS	14129 N. FOREST OAK circle	DAVIE FL 33325
D	AMARILIS CORDOVA	1581 HARBORSIDE CIRCLE	Weston FL 33326

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-06-02
Date

954 663-8464
Daytime Phone #

CR2E081 (9/01)

For Filing Purposes Only

LOGISTIC TRANSIT, INC.

C/O Jairo A Sandoval

4069 HOLLY COURT

WESTON FL 33331

P00000072127

June 6, 2002

Ms. Chesnut
DIVISION OF CORPORATIONS
PO Box 6327
Tallahassee FL 32314

RECEIVED
02 JUN -7 AM 8:56
DIVISION OF CORPORATIONS

Dear Ms. Chesnut:

You will find enclosed a request for the REINSTATEMENT of Logistic Transit Inc. which was declared inactive due to non-filing of the required Uniform Business Reports for the years 2001 and 2002.

- the reason for not having filed the required reports resulted from **non-receipt** of the necessary blank forms due to address change
- **the Registered Agent of the Corporation moved** from 458 Lakeview Drive #4 Weston, FL 33326 and the forms could have been lost, misplaced or discarded by the new occupants at that address
- the corporation also moved to 7220 NW 36th Street Suite 504 Miami FL 33166

We are a very small corporation, owned and operated by family members, providing inter-state trucking services. Our profit margin is extremely low. We would like to continue doing business in Florida and we would like to continue to contribute to economy of Florida.

For the reasons mentioned above, we beg the Department of Corporations to please consider the possibility of reinstating the corporation without being subject to the reinstatement Fee penalty of \$600.00.

Should you wish to contact us, please do not hesitate to call the undersigned at (954) 385-3140 or MOBIL (954) 663-8464 or by mail to the above address.

Sincerely,

