

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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

DOCUMENT # P00000081397

1. Corporation Name

NATIONAL MOTOR'S OF MIAMI CORP.

2. Principal Office Address

17528 SOUTH DIXIE HWY 17528 SOUTH DIXIE
Suite, Apt. #, etc.

City & State

Miami

Zip
33157

Country

DADE

3. Mailing Office Address

17528 SOUTH DIXIE
Suite, Apt. #, etc.

City & State

Florida

Zip

33157

Country

DADE

100004733251--4

-12/19/01--01065--008

***150.00 ***150.00

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-7039242

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

Richard Quincoces

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

14318 SW 176 Terr

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33177

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

Date

REGISTERED AGENT MUST SIGN

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
President	Richard Quincoces	14318 SW 176 Terr	MIAMI FL 33177
VP	JOSE J MARTINEZ	9135 Ramblwood Drive	Coral Springs FL

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

Date

Daytime Phone #

292

National Motor's Of Miami
17528 South Dixie Hwy
Miami, Florida 33157

To whom it may concern;

Regarding our yearly corporate filling, we had no idea that we had to do this as this was our first corporation. We had never received any form's our any information from your office. A few day's ago as we went on the internet we found out that our company was dissolved please help us to reinstate our corporation.

Thank you

Sincerely Your's