

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 MAY 21 PM 4:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P000 000 83129

1. Corporation Name

Intercontinental Auto Brokers
Inc.

W03-11287

601
05/23/03

600019845376
05/23/03--01043--023 **150.00

2. Principal Office Address

P.O. Box 14152

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 14152

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33690

Country

U.S.A

Zip

33690

Country

U.S.A

4. Date Incorporated or Qualified
To Do Business in Florida

09-01-2000

5. FEI Number

59-3713433

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

Ross Scopelliti

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

3217 A.S. MACDILL AVE

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33690

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 April 2 - 2003

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
D	Ross Scopelliti	3217 A.S. MACDILL AVE	TAMPA FL 33690
D	John King	3217 A.S. MACDILL AVE	TAMPA FL 33690
D	Pam Carruthers	3217 A.S. MACDILL AVE	TAMPA FL 33690

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:

Ross Scopelliti (Director)

April 2 - 2003

Date

Daytime Phone #

CR2E081 (9/01)

APRIL 2 2003

INTERCONTINENTAL AUTO BROKERS INC.

P.O. BOX 14152
TAMPA FL 33690

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
REINSTATEMENT DIVISION
409 EAST GAINES ST
TALLAHASSEE FL 32399

re; NON-RECEIPT OF PREVIOUS YEARS BUSINESS REPORTS

DEAR SIR OR MADAM:

WE HAVE SPOKEN TO ONE OF YOUR REPRESENTATIVES WHO INFORMED US THAT DUE TO OUR PLIGHT WE HAD TO WRITE A LETTER OF OUR CIRCUMSTANCES AND FORWARD A TOTAL OF \$300.00 DOLLARS IN ORDER TO REINSTATE.

THE REASON FOR OUR PLIGHT ARISES FROM THE FACT THAT WE HAD CHANGED OUR ADDRESS AND WE HAD CHANGED ATTORNEYS. OUR REGISTERED AGENT WAS OUR ATTORNEY AND WE WERE MISINFORMED AS TO WHETHER YOUR OFFICES WERE NOTIFIED. THE CULMINATION OF ALL THESE CIRCUMSTANCES RESULTED US IN NOT RECEIVING THE REPORTS AND THEREFORE NOT BEING ABLE TO FILE. WE TRULY ARE SORRY FOR WHAT HAS OCCURRED AND ARE ASKING FOR YOUR ASSISTANCE IN ENABLING US TO REINSTATE. THANKING YOU IN ADVANCE FOR YOUR ANTICIPATED COOPERATION.

SINCERELY,

INTERCONTINENTAL AUTO BROKERS INC.