

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV 13 AM 9:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000089466

1. Corporation Name

GIL TRUCKING, INC.

Principal Place of Business

4800 QUEENSBORO AVE. SOUTH
ST. PETERSBURG FL 33711

Mailing Address

4800 QUEENSBORO AVE. SOUTH
ST. PETERSBURG FL 33711

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/20/2000

5. FEI Number

31-1692023

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	LUFF, JR., GEORGE I	4800 QUEENSBORO AVE. SO.	SAINT PETERSBURG FL 33711

8. Name and Address of Current Registered Agent

LUFF, GEORGE
4800 QUEENSBORO AVE. SOUTH
ST. PETERSBURG FL 33711

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

11/4/02

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., 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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/4/02

Daytime Phone #

CR3E040 (8/02)

Zell

G.I.L. TRUCKING INC
4800 Queensboro Ave SO
ST Petersburg FL 33711

10/4/82

727 329 8035 Business
727 692 7051 Cell

FBI 31-1692023

To Whom IT my concern,

I'm an over the road Truck driver, with one truck
Sometime ~~time~~ gone 2 or 3 weeks at a time, I have no one
at home. So its very hard for to take care of everything.

My account went on vacation after TAX time, so
I filled out the forms myself.

I received a notice, that I had filled the forms
out wrong. So, I called your office. The lady was
very nice. She told me what I had to fix. I thought
I signed it, But I guess I over looked it. I gave
The lady my cell # (727 692 7051), just in case there
was a problem.

I'm sorry for the trouble. I don't want
to loose my incorporation. I've signed Document
00000089466 and returned it. I hope this will
fix things.

Sincerely

George I Luff Jr
George I Luff Jr
President