

PLEASE READ ALL INSTRUCTIONS BEFORE CO

1072

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

03 DEC 31 PM 1:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P01000000761**

**1. Corporation Name**

Y Y EXPRESS INC.

**2. Principal Office Address**

252 W 37 STREET

Suite, Apt. #, etc.

City & State

HIALEAH, FL

Zip

33012

Country

**3. Mailing Office Address**

252 W 37 STREET

Suite, Apt. #, etc.

City & State

HIALEAH, FL

Zip

33012

Country

**REINSTATEMENT**

03

**4. Date Incorporated or Qualified  
To Do Business in Florida**

01-02-01

**5. FEI Number**

65-1075843

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$6.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

YOEL A. YCASA

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

252 W 37 ST

Suite, Apt. #, Etc.

City

HIALEAH

State

FL

Zip Code

33012

500026974935

01/14/04--01065--029 \*\*490.00

**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

*Yoel A. Ycasa*

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
P/D	YOEL A. YCASA	252 W 37 STREET	HIALEAH, FL 33012
V/D	NORMA I. YCASA	1156 W 50 PL	HIALEAH, FL 33012

**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:**

*Yoel A. Ycasa*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

B3

2012

TO: DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

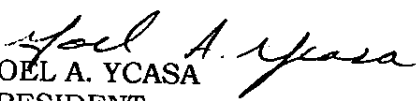
TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR 2003 UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY,

  
YOEL A. YCASA  
PRESIDENT