### PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

### **APPLICATION FOR** REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

# P01000054860

1. Corporation Name

PEREZ & SON TRANSPORT, INC.

Principal Place of Business

**DOCUMENT #** 

Mailing Address

3308 ORIENT RD

2200 ODIENT DO



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TAMPA FL 33619 TAMPA FL				·			T CONTROL IN BOILS HOW BOWN BOWN BOWN BOWN BOWN BOWN BOWN BO			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.							DEIMO	TATEMENT	fr <sub>Q</sub>	
New Principal Office Address, If Applicable     New Mailing Office Address, If Applicable							4. Date Incorporated or Qualified			
Suite, Apt. #, etc. Suite, Apt. #,				etc.			5. FEI Number Applied For			
City & State City & State								59-3718530 Not Applicable		
Zip Country Zip			Zip	Country			6. CERTIFICATE OF STATUS DESIRED (			
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			Street Address of Each Officer and/or Director				City / State / Zip		
PD	PEREZ, RAFAEL			3308 ORIENT RD			· · · · · ·	TAMPA FL 33619		
TD	PEREZ, NARCISO			3308 ORIENT RD				TAMPA FL 33619		
<del>30</del>	VELEZ, ANDRES			3308-ORIENT:RD				TAMPA-FL 33619.		
5D	MILKA	3308 ORIENT RD				TAMPA, FL 33619				
					100024818501 11/18/03=-01092003 **150.00					
				<u> </u>	<del></del>	<del> </del>	0.11		M-1	
8. Name and Address of Current Registered Agent Name, 1 1 1							9. Name and Address of New Registered Agent			
VELEZ, ANDRES						Street Address (F	Street Address (P.O. Box Number is Not Acceptable)			
VELEZ ACCOUNTING SERVICES P O BOX 270069 Suite-April							18 Onent Kal			
TAMPA FL 33688										
Cit Tam							0a State Zip Code FL 33619			
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 Date 10/27/2023										
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 filling 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

#### PEREZ & SON TRANSPORT, INC.

3308 Orient Road Tampa, FL 33619 Phone (813) 622-8114 Fax (813) 740-8362

October 27, 2003

To Whom It May Concern,

Please be advised that we did not receive the 2003 UBR this year. I apologize for not following up on making sure this form was filed and the fees paid, but this was handled last year by our then agent/secretary Mr. Velez, whom we have not been able to reach some time. As you can probably figure, we are new at this and in no way were we trying to avoid filing this report nor paying the fees due. This is why as soon as this notice was received by us, your office was contacted and we were advised to write a letter explaining the situation and to submit it along with the reinstatement application and a check for \$150.00.

Enclosed please find the completed reinstatement application and check number 1268 for the amount of \$150.00.

If there is any further action required on our part to make sure reinstatement takes place, please advise.

Thanking you in advance.

Sincerely,

Rafael Perez, Sr

President - Perez & Son Transport, Inc.

RP/mfp