

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

05. 31 408

FILED
03 JUN 30 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 06000058431

1. Corporation Name

GIGN CARLOS TRUCKING INC.

2. Principal Office Address

20030 N.E 21st Ave

Suite, Apt. #, etc.

City & State

N.M.D FLA

Zip

33179

Country

U.S.A

3. Mailing Office Address

20030 N.E 21st Ave

Suite, Apt. #, etc.

City & State

N.M.D FLA

Zip

33179

Country

U.S.A

100021194841
06/30/03--01045--007 **300.00

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

5. FEI Number

65-1116575

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

SANTIAGO MAINER

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

20030 N.E 21st Ave

Suite, Apt. #, Etc.

City

N.M.D

State

FL

Zip Code

33179

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

X [Signature]

Date

05/31/03

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
PS, J	SANTIAGO MAINER	20030 N.E 21 st Ave	N.M.D FLA 33179

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

05/31/03

Daytime Phone #

CR2E081 (10/02)

th 7/2

06/05/2003

TO: DIVISION OF CORPORATIONS

SUBJECT: *GIANCARLOS TRUCKING INC.*
RE-INSTATEMENT FORM 2002/2003

ENCLOSED PLEASE FIND MY CORPORATION REINSTATEMENT WITH MY FEE OF
\$300.00 FOR THE YEARS 2002 & 2003 AS DISCUSSED WITH YOUR DEPARTMENT, DUE I
NEVER RECEIVED THE ORIGINAL

REPORT OF 2002 OR 2003 AND YOU DISSOLVE THE CORPORATION AND I HAD TO
DOWNLOADED FROM THE INTERNET PER YOUR INSTRUCTIONS.

SORRY FOR ANY INCONVENIENCE THIS MAY HAVE CAUSED.

SINCERELY YOURS



SANTIAGO MAINEGRA