

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 DEC 12 AM 10:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000083162

1. Corporation Name

UNIVERSE CARGO SYSTEMS, INC.

2. Principal Office Address

3350 SW 148TH AVE

3. Mailing Office Address

3350 SW 148TH AVE

Suite, Apt. #, etc.

SUITE: 110

Suite, Apt. #, etc.

SUITE: 110

City & State

MIRAMAR FL

City & State

MIRAMAR FL

Zip

33027

Country

USA

Zip

33027

Country

USA

REINSTATEMENT

CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

08/22/2001

5. FEI Number

20-8016355

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

EDGARDO SERRANO

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

3350 SW 148TH AVE

Suite, Apt. #, Etc.

SUITE: 110

City

MIRAMAR

State

FL

Zip Code

33027

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

*E. Serrano*

REGISTERED AGENT MUST SIGN

Date 12-11-06

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
PDST	ARTEMIO A. FONTALVO 95%	3350 SW 148TH AVE STE: 110	MIRAMAR FL 33027
D	IVETT MANJARRES 5%	3350 SW 148TH AVE STE: 110	MIRAMAR FL 33027

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 contained in Chapter 119, 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

12-11-06

Date

Daytime Phone #

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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 THE ANNUAL REPORT NOTICE FOR THE YEARS OF 2002, 2003, 2004, 2005, AND 2006 FROM YOUR OFFICE TO PAY THE ANNUAL FEE. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS COMPANY 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,

  
\_\_\_\_\_  
ARTEMIO A. FONTALVO  
PRESIDENT