

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 MAR -4 PM 3:22

DOCUMENT # P01000103391

1. Corporation Name

Jay Transportation Service, Inc.

2. Principal Office Address

151 NW 41ST

Suite, Apt. #, etc.

City & State

Miami FL

Zip

33127

Country

3. Mailing Office Address

151 NW 41 ST

Suite, Apt. #, etc.

City & State

Miami FL

Zip

33127

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

10/25/01

5. FEI Number

65-11479018

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$3.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Juan Mario Reyes

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

151 NW 41 ST

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33127

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

*J Reyes*

Date 02-14-03

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
owner	Juan Maria Reyes	151 NW 41 ST	Miami FL 33127

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:

*J Reyes*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-14-03

Date

Daytime Phone #

CR2E081 (10/02)

JAY TRANSPORTATION SERVICE INC.

151 NW 41<sup>st</sup> Miami Fla 33127

February 14, 2003

Uniform Business Report Reinstatement

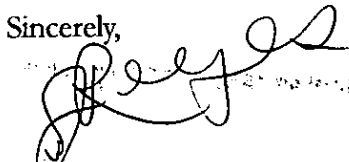
Department Of State Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl 32314

Dear Department Of State Division of Corporations,

This letter is to inform that I did not receive the uniform Business form, I did not even know that I was to receive one, I went to fix my taxes and the gentlemen advise if I sent in the Uniform form, there I said no he gave me the phone number were to call. I did and spoke to a young lady by the name of Bar bra, she advise to get the form through internet fill out and mail with a payment of \$300.00 and to request if possible to waive the fees. Please call me if need any other information, I can be reached at (786) 295-4812

Thank you in advance

Sincerely,



Juan M Reyes