

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

**CORPORATION REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

02-03 UBR

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 MAR 28 AM 9:06

DOCUMENT # P01000119558

1. Corporation Name  
TWO IN ONE AUTO SALES INC

2. Principal Office Address  
301 NW 79 ST.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State  
Miami, FL

Zip  
33150

Country  
USA

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number  
65-1159623

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  
RAIMUNDO M. MENDOZA

Street Address (P.O. Box Number is Not Acceptable)  
301 NW 79 Street

Suite, Apt. #, Etc.

City  
Miami

State  
FL

Zip Code  
33150

000014908200  
03/28/03--01044--028 \*\*300.00

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  
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	Guan Vega	10710 NW 66 ST #108 MIAMI FL 33178	MIAMI, FL 33178
VP	RAIMUNDO M. MENDOZA	5511 NW 112 ST MIAMI FL	MIAMI, FL 33178
S	Hilora Vega	10710 NW 66 ST #108 MIAMI FL	MIAMI FL 33178
T	Cristina Dulias	5511 NW 112 ST MIAMI FL	MIAMI FL 33178

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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date  
3/27/03

Daytime Phone #  
305-757-7776

CR2E081 (10/02)

2 of 2 ✓

March 25, 2003

Department of State  
409 East Gaines Street  
Tallahassee, FL 32399

Re: Two In One Auto Sales Inc.  
Document #P01000119558

To Whom It May Concern;

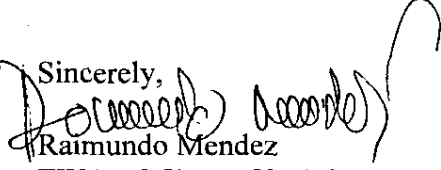
Please be advised that we failed to file our annual report due to the fact that we never received the annual report form. Our new address and telephone numbers are listed below.

301 NW 79 Street  
Miami, FL 33150  
(305)757-7776

Please accept this letter as an apology for our late submission of the annual report.

The reinstatement form is completed and attached for your records with our check for \$300.00

Thank you in advanced for your prompt assistance in this matter.

Sincerely,  
  
Raimundo Mendez  
TWO IN ONE AUTO SALES INC.