

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -6 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000120021**

1. Corporation Name

TRANSGLOBAL SERVICES, INC.

Principal Place of Business

2415 N. 20TH AVENUE
HOLLYWOOD FL 33020

Mailing Address

2415 N. 20TH AVENUE
HOLLYWOOD FL 33020



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

160 South Island

Suite, Apt. #, etc.

City & State

Golden Beach FL

Zip

33160

Country

USA

3. New Mailing Office Address, If Applicable

160 South Island

Suite, Apt. #, etc.

City & State

Golden Bch, FL

Zip

33160

Country

USA

REINSTATEMENT

03

4. Date Incorporated or Qualified
To Do Business in Florida

12/19/2001

5. FEI Number

01-0558377

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	KOSS, ELENA	2415 N. 20TH AVENUE <u>160 South Island</u>	HOLLYWOOD FL 33020 <u>Golden Beach, FL 33160</u>

000024488010
11/06/03--01048--012 **150.00

8. Name and Address of Current Registered Agent

KOSS, ELENA
2415 N. 20TH AVENUE
HOLLYWOOD FL 33020

9. Name and Address of New Registered Agent

Name

Koss, Elena

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

160 South Island

Suite, Apt. #, Etc.

City

Golden Beach

State

FL

Zip Code

33160

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

[Signature]

REGISTERED AGENT MUST SIGN

Date Oct 27, 2003

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 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

Elena D. Koss Oct 27, 2003

Date 954-984-1836 Daytime Phone #

CR2E040 (7/03)

October 27, 2003

FLORIDA DEPARTMENT OF STATE
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Reinstatement of TransGlobal Services, Inc.

To Whom It May Concern:

Please consider this request to reinstate TransGlobal Services, Inc. Please note that the address of record for the corporation has changed and that **no previously sent uniform business reports (UBI) were received** by the corporation.

I have enclosed the appropriate filing fee.

Thank you for your assistance with this matter.

Yours truly,

A handwritten signature in black ink, appearing to read 'Elena D. Koss', written over a horizontal dashed line.

Elena D. Koss
Director