

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

172

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 DEC 12 PM 9: 58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P02000005134*

1. Corporation Name

AMIGO'S AUTO SALES, INC.

2. Principal Office Address

499 Airport Rd N

Suite, Apt. #, etc.

City & State

Naples, FL

Zip

34104

Country

USA

3. Mailing Office Address

499 Airport Rd. N.

Suite, Apt. #, etc.

City & State

Naples, FL

Zip

34104

Country

USA

700025465087

12/12/03--01083--028 **150.00

4. Date Incorporated or Qualified
To Do Business in Florida

01-10-02

5. FEI Number

30-0016239

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

Leodil L. Mejias

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

499 Airport Road N.

Suite, Apt. #, Etc.

City

Naples

State

FL

Zip Code

34104

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

[Signature]

Date

12-10-03

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
<i>P/S/O</i>	<i>Leodil L. Mejias</i>	<i>499 Airport Rd. N</i>	<i>Naples, FL 34104</i>

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

12-10-03

Daytime Phone #

CR2E081 (10/02)

282

Amigo's Auto Sales, Inc.
499 Airport Pulling Road North
Naples, FL 34104

December 12th, 2003

Dept of State
Division of Corp
PO Box 6327
Tallahassee, FL 32314

RE: Corporation administratively de-solved

Dear DOS:

I recently was notified by my Accountant that our Corporation UBR was not filed for this year 2003. We informed him that we never received the form. He downloaded the form from your web site. The address that you show in your system is different. This may be the reason for not receiving the form.

I am enclosing a check in the amount of \$150. Please accept this payment for 2003 UBR fee.

Sincerely,



Leodil L. Mejias
President
Amigo's Auto Sales, Inc.