### PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

### APPLICATION FOR REINSTATEMENT



# FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

**DIVISION OF CORPORATIONS** 

## DOCUMENT # **P02000025126**

1. Corporation Name

### TRUCKLANDIA AUTO BROKERS, INC.

Principal Place of Business

Mailing Address

4601 SW 74TH AVENUE MIAMI FL 33155 4601 SW 74TH AVENUE MIAMI FL 33155 FILED

03 DEC 12 PH 12: 46

SECRETARY OF STATE
TALLARY SEE: FLOSINA

If above a	ddresses are	incorrect in any way, line to	nrough incorrect in	nformation and enter	r correction below.	REIN	STATIN	ENT 03	
				ng Office Address, If Applicable		Date incorporated or Qualified     To Do Business in Florida     03/06/2002			
Suite, Apt. #, etc. Suite,				pt. #, etc.					
City & State			City & State	City & State		N/- 2/ 2/// 27			
						6.			
Zip		Country	Zip	Count	try		OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status	
7. Names a	and Street Ad	dresses of Each Officer an	d/or Director (Flo	rida nonprofit corpor	rations must list at lea	ast 3 directors)			
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip		
PD	AREVALO, AVIMAEL			300 SW 69TH AVE			MIAMI FL 33144		
SD	HERNANDEZ, IVAN OMAR			4601 SW 74TH AVENUE			MIAMI FL 33155		
						00 12/11/	0025427 0301061007	<b>690</b> **150.00	
8. Name and Address of Current Registered Agent						9. Name and Address of New Registered Agent			
					Name				
AREVALO, AVIMAEL 4601 SW 74TH AVENUE					Street Address (P.O. Box Number is Not Acceptable)				
	FL 33155	- <del> </del>			Suite, Apt. #, Etc				
					City State   Zin Code				

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.

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

Signature of Registered Agen

SIGNATURE AND TYPED OR PRINTED NAME OF SERVING OFFICER OR DIRECTOR

10-08-03

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Davtime Phone #

Trucklandia Auto Brokers, Inc. 4601 SW 74<sup>th</sup> Avenue Miami, FL 33155

Wednesday, November 12, 2003
To Whom It May Concern:
This letter is to inform you that we did not receive the annual report for and are requesting a waiver. We have enclosed a check in the amount \$150.00 for the appropriate fees. Thank you.
Sincerely,
Ivan Hernandez
. aq