


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

04 MAR 16 PM 12:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 of 2

<b>CORPORATION REINSTATEMENT</b>	 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P02000025236

1. Corporation Name

AMERICA TRANSPORT CORPORATION

300030500093  
03/16/04--01004--017 \*\*308.75

2. Principal Office Address 878 Bella Vista Way Suite, Apt. #, etc. City & State Orlando, Florida Zip 32825 Country		3. Mailing Office Address 878 Bella Vista Way Suite, Apt. #, etc. City & State Orlando, Florida Zip 32825 Country	
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REINSTATEMENT

03-04

4. Date Incorporated or Qualified To Do Business in Florida March/01/02	
5. FEI Number 600 00 2735	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name Darwin J. Perez

Street Address (P.O. Box Number is Not Acceptable)  
878 Bella Vista Way

Suite, Apt. #, Etc.

City  
Orlando

State  
FL  
Zip Code  
32825

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

*Darwin J. Perez*

Date March/08/04

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	Darwin J. Perez	878 Bella Vista Way	Orlando, FL 32825
P/S/V	Iris J. Perez	878 Bella Vista Way	Orlando, FL 32825

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:

*Darwin J. Perez*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DARWIN J. PEREZ

Date

Daytime Phone #

March/08/04 (321)961-1338

CR2001 100223

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2052

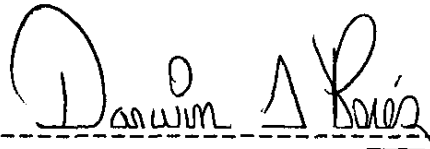
AMERICA TRANSPORT CORPORATION  
878 BELLA VISTA WAY  
ORLANDO, FLORIDA . 32825  
office (321) 961 - 1338  
cell (267) 972-7917

March 08 , 2004

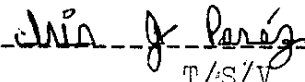
FLORIDA DEPARTMENT OF STATE  
Division of Corporation  
P.O. Box 6327  
Tallahassee , Florida. 32314

To Who May I Concern;

This letter is to inform you that AMERICA TRANSPORT CORPORATION / Document # PO2000025236, last year 2003 had a change of address and we never receive your report on time in the new address. Can you please check and correct the new information. Now for this year I speak we customer service and they talked me to send this application for Corporation Reinstatement. And a check for \$300.00 dollars + \$ 8.75 for Certificate of status. Thank you for your time,



President



T/S/V