PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

P02000035421 DOCUMENT

1. Corporation Name

D + D TRANSPORTATION INC.

Principal Place of Business

Mailing Address

6371 POWERS POINTE CIRCLE ORLANDO FL 32818

6371 POWERS POINTE CIRCLE ORLANDO FL 32818

If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable

20002973301; 03/02/0401057016 **	2 150	3.00
Date Incorporated or Qualified To Do Business in Florida 04/01/3	200)2
5. FEI Number		Applied For
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SECHETARY OF STATE FALLAHASSEE FLORIDA

REMSTATEMENT 03-04

Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

\$8.75 Additional Fee required = CERTIFICATE OF STATUS DESIRED 🔲 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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	
D	DEONARINE, DHANESHWAR	3109 S. SEMORAN BLVD UNIT 93	ORLANDO FL 32823	
		04/7	00029733012 06/04-01005-025 **150.00	

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DEONARINE, DHANESHWAR 3109 S. SEMORAN BLVD UNIT 93 ORLANDO FL-32823

DEONARINE Street Address (P.Q. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

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 Age

REGISTERED AGENT MUST SIGN

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 filling 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

December 23, 2003

Florida Department of State Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

RE: Document #P02000035421

As per our conversation with the Florida Department of State, D+D Transportation was asked to write this letter concerning the reinstatementof-D+D=Transportation and the waiver of any penalties. The reason D+D Transportation is requesting a reinstatement and fee waiver is due to the fact that D+D-had an address change: The Notice of Dissolution sent from the Florida Department of State, concerning the filing was more than likely sent to D+D Fransportation's-incorrect-address:≃Due⊧to-this:event-D+D≟Transportation₌was.... unaware that the corporation was being dissolved as per the notice from the Florida Department of State. For the reason of the address change D+D Transportation is asking The Florida Department of State to reinstate the corporation and waive the penalty. The required \$150.00 reinstatement fee is enclosed along and the correct address is supplied.

Thank you,..

Dhaneshwar Deonarine President La Company of the Artist Company o

D+D-Transportation-Inc.; The Property Transport of the Lot of the Community

637.1 Powers: Pointe Circle

Orlando, FL-32818----

Tel: 407-299-9526

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