

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 APR 29 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

P-02000053658
LSC Custom Cars Inc.

2. Principal Office Address

1123 NW 15th Ave

Suite, Apt. #, etc.

3. Mailing Office Address

721 NW 5th Ave

Suite, Apt. #, etc.

City & State

Ft-Lauderdale

Zip

33311

Country

USA

City & State

Ft-Lauderdale

Zip

33311

Country

USA

8/11/03 90214002 400.00
6/20/03 90028 03/58.75

4. Date Incorporated or Qualified
To Do Business in Florida

05/02

5. FEI Number

331013440

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

*\$875 Additional Fee required
for a Certificate of Status*

7. Name and Address of Current Registered Agent

Name

Learie Richard Hernandez

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

721 NW 5th Ave

Suite, Apt. #, Etc.

City

FE-Lauderdale

State

FL

Zip Code

33311

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

Learie Hernandez

REGISTERED AGENT MUST SIGN

Date

04/19/04

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>owner</i>	<i>Learie R. Hernandez</i>	<i>1123 NW 15th Ave</i>	<i>Ft-lau derdale 33311</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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PS 2 of 2

LEARIE. R. HERNANDEZ

LSC CUSTOM CARS INC PO2000053658

721 NW 5th AVE. FT. LAUDERDALE FL. 33311

954-467-6139 WORK 954-629-3568 CELL

04/26/04

THE REASON I WAS LATE TO RENEW MY ANNUAL REPORT IS BECAUSE MY WIFE WAS IN SWEDEN AND WAS VERY SICK, SO I HAD TO FLY BACK & FORTH. MY SISTER INLAW WAS TAKING CARE OF MY MAIL BUT I GUESS SOME MAIL WAS MISPLACED.

NOW THAT I HAVE MY WIFE BACK, I ASSURE YOU THAT I WILL TAKE ALL THE NECESSARY MEASUREMENTS TO MAKE SURE THAT THIS DOES NOT HAPPEN AGAIN.

THANKS.

NB IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT ANDY BUNLAP. WE'VE SPOKEN & HERE IS THE AMOUNT THAT I WAS TOLD TO PAY.

CHECK ENCLOSED \$150/-
