

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION  
FOR  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 28 PM 5:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REINSTATEMENT** 03



100024196781  
10/28/03--01018--023 \*\*150.00

DOCUMENT # **P02000055041**

1. Corporation Name

**FLUIDS & LOGISTICS INC.**

Principal Place of Business

Mailing Address

1541 BRICKELL AVENUE  
#604  
MIAMI FL 33129

1541 BRICKELL AVENUE  
#604  
MIAMI FL 33129

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable  
**1541 Brickell Avenue**

3. New Mailing Office Address, If Applicable  
**2440 Coral Way**

4. Date Incorporated or Qualified  
To Do Business in Florida

**05/17/2002**

Suite, Apt. #, etc.  
**Suite 604**

Suite, Apt. #, etc.

5. FEI Number

**46-0496095**

Applied For

City & State  
**Miami, Florida**

City & State  
**Miami, Florida**

Not Applicable

Zip  
**33129**

Country  
**USA**

Zip  
**33145**

Country  
**USA**

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
<del>PVSD</del>	<del>DIEZ VELEZ, DARIO</del>	<del>1541 BRICKELL AVENUE / #604</del>	<del>MIAMI FL 33129 /</del>
PVSTD	Jose Andres Diez	1541 Brickell Ave, # 604	Miami, Florida 33129

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**DIEZ VELEZ, DARIO**  
**1541 BRICKELL AVENUE**  
**#604**  
**MIAMI FL 33129**

Name  
**Jose Andres Diez**  
Street Address (P.O. Box Number is Not Acceptable)  
**1541 Brickell Avenue, # 604**  
Suite, Apt. #, Etc.  
City  
**Miami** State **FL** Zip Code **33129**

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 Agent *[Signature]* **SIGNATURE** REGISTERED AGENT MUST SIGN Date **10/22/03**

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.

SIGNATURE: *[Signature]* **SIGNATURE** SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date **10/22/03** Daytime Phone #

CRE040 (7/03)

**Law Offices**  
**PINO & ASSOCIATES, P.A**  
2440 Coral Way  
Miami , Florida 33145

Raul F. Pino, Esq.  
Isaura M. Pino, Esq.

Telephone (305) 854-1904  
Facsimile (305) 854-1937

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October 21, 2003

Secretary of Florida  
Division of Corporation  
Caller Service # 1500  
Tallahassee, FL 32302-1500

Re: FLUIDS & LOGISTICS, INC.

Gentlemen:

As per our telephone conversation with your office and following your instructions, enclosed please find reinstatement form which has been completed and duly executed by the corporation officer as well as check in the amount of \$ 150.00 payable to Department of State.

Please be advised that Mr. Diez never received the 2003 annual report nor any notice advising him that it was time to renew the above mentioned corporation. Mr. Diez resides at a complex building, there are a lots of apartments and many times the correspondence get lost. For this reason Mr. Diez has decided to change the corporation mailing address as reflected in the attached form.

We will really appreciate that the 2003 annual report fee be accepted and that the mailing address be changed to this office address:

Do not hesitate to contact us if you should need any additional information.

Sincerely yours,

  
RAUL F. PINO, ESQ

RFP/vv  
Encl