

1082  
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 DEC 14 AM 8:00

DOCUMENT # P02000057597

**1. Corporation Name**

INTRAB CORPORATION

7105 NW 50th Street  
C/O BW&T Business Advisers, Inc

**2. Principal Office Address**

7105 NW 50th Street

**3. Mailing Office Address**

C/O BW&T Business Advisers, Inc

Suite, Apt. #, etc.

NS0130

Suite, Apt. #, etc.

9050 Pines Blvd., Ste 450-8

City & State

Miami, Florida

City & State

Pembroke Pines, FL

Zip

33166

Country

USA

Zip

33024

Country

USA

**REINSTATEMENT**

03-04

MRD

**4. Date Incorporated or Qualified**

To Do Business in Florida 05/23/2002

**5. FEI Number**

04-3673338

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Gomez, Hernando

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

7105 NW 50th Street

Suite, Apt. #, Etc.

NS0130

City

Miami

State  
FL

Zip Code  
33166

**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

by Hernando Gomez

Date 12/8/04

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
DPS	Gómez, Hernando	7105 NW 50th Street	Miami, FL 33166
DVS	Sanchez, Del Pilar Ma.	7105 NW 50th Street	Miami, FL 33166
DVP	Ortiz, Bernardo	7105 NW 50th Street	Miami, FL 33166

300043402013  
12/14/04--01040--001 \*\*300.00

**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:

by Hernando Gomez

12/08/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)

292

e-mail: [accounting@bwtba.com](mailto:accounting@bwtba.com)

[illegible]

Tallahassee, FL 32314

FEIN No. 04-3673338

Dear Sir or Madam:

Thus, I respectfully ask that you reinstate M. Benitez Cargo Express, Inc and that you waive any penalties associated with doing the same. I am enclosing the Corporation reinstatement Form for your review and consideration along with a check in the amount of \$ 300.00 corresponding to your fee to reinstate this corporation without penalty. Should you have any questions, please do not hesitate to contact this office.

Sincerely,

Nayarit Briceño

Accountant

On behalf of Hernando Gomez

President

Enclosures