

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUN 14 PM 3:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000085402

1. Corporation Name

K. D. MAC TRANSPORTATION SERVICES, INC

2. Principal Office Address

P.O. BOX 622619

Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA

Zip

32862

Country

U.S.A.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified

To Do Business in Florida 08/06/2002

5. FEI Number

13-4205387

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 03-04

7. Name and Address of Current Registered Agent

Name

BOWERBANK INCOME TAX & ACCOUNTING SERVICES, INC.

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

1113 NORTH PINE HILLS ROAD

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32808-7125

500038020765

06/16/04--01057--010 **308 75

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

[Signature]
REGISTERED AGENT MUST SIGN

Date 06/04/04

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
PSTD	MCALMONT, KENNARD D.	P.O. BOX 622619	ORLANDO, FLORIDA 32862

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:

Kennard D. McAlmont
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

321-917-7574

Date

Daytime Phone #

CR2E081 (01/04)

K.D. TRANSPORTATION SERVICES, INC.
P.O. BOX 622619
ORLANDO, FLORIDA 32862
TELEPHONE: 321-917-7574

Re: Document Number P02000085402
K.D. Mac Transportation Services, Inc.

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

Dear Sir or Madam:

In regards to my active duty status with the United States Army Reserve, I was call to active duty on February 07, 2003 and was released from active duty May 27, 2004; because of this I was unable to renew the Annual Corporate Report.

Enclosed please find check in the amount of three hundred & eight dollars & seventy-five cents (\$308.75) cost for corporation reinstatement and certificate of status.

Sincerely


Kennard McAlmont

Enclosure: Corporation Reinstatement & Department of Army Order M-036-0072 & 106-0056