

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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FILED

06 DEC -7 AM 10: 25

RECEIVED BY STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000094197

1. Corporation Name

SAN LAZARO EXPRESS INC.

2. Principal Office Address
3513 HIBISCUS PL

Suite, Apt. #, etc.

City & State
MIRAMAR, FL

Zip
33023

Country

3. Mailing Office Address
3513 HIBISCUS PL

Suite, Apt. #, etc.

City & State
MIRAMAR, FL

Zip
33023

Country

4. Date Incorporated or Qualified
To Do Business in Florida 08/28/2002

5. FFL Number
02-0640825

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (12/05)

03-06

7. Name and Address of Current Registered Agent

Name
FERNANDO LIMA

Street Address (P.O. Box Number is Not Acceptable)
3513 HIBISCUS PL

Suite, Apt. #, Etc.

City
MIRAMAR

State
FL

Zip Code
33023

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

REGISTERED AGENT MUST SIGN

Date

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
P/D	FERNANDO LIMA	3513 HIBISCUS PL	MIRAMAR, FL 33023

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 contained in Chapter 119, 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 #

SAN LAZARO EXPRESS INC.

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

AS PER OUR PHONE CONVERSATION I AM SENDING TO YOU THIS LETTER OF EXPLANATION AND THE UBR FORM ALONG WITH A CHECK TO PROPERLY UPDATE CORPORATION I FURTHER STATE THAT I DID NOT RECEIVE THE NOTICE FOR 2003 UBR FIRST NOR SECOND NOTICE. I WOULD LIKE TO RESOLVE THIS ISSUE, PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

CORDIALLY,


FERNANDO LIMA
PRESIDENT