

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 MAY 19 AM 9:50

1/2

DOCUMENT # p 02000097502

**1. Corporation Name**

mega cargo and associates inc

**2. Principal Office Address**

8375 nw68 st

**3. Mailing Office Address**

8375 nw 68 st

CR2E081 (8/05)

0305

Suite, Apt. #, etc.

n/a

Suite, Apt. #, etc.

n/a

City & State

miami

City & State

fla

**4. Date Incorporated or Qualified  
To Do Business in Florida**

09-10-2002

**5. FEI Number**

75-3006627

Applied For

Not Applicable

Zip

33166

Country

Zip

Country

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

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

Name

Zaida perna

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

8375 nw 68 st

Suite, Apt. #, Etc.

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

*Zaida Perna*

Date october 03 -2005

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
pd	zaida perna	8375 nw 68 st	miami fla 33166
std	zaida perna	8375 nw 68 st	miami fla 33166
d	miguel rodriguez	1740 coral way	miami fla 33145

**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:

*Zaida Perna*

zaida Perna

5/16/06

305-4062406

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/2

*MEGA CARGO & ASSOCIATES*  
8375 N.W. 68<sup>TH</sup> ST.  
MIAMI-FL. 33166

Miami, April 17 , 2006

To: Florida Department of State.

We Mega Cargo & Associates register under Document# P02000097502  
Have never received the notice of administration dissolution or revocation  
Notice, we have moved during that period of time and it was never received by us; our  
Old Address : 9300 N.W. 58<sup>th</sup> St. Miami-Fl. 33178.  
New-Address: 8375 N.W. 68<sup>th</sup> St. Miami-Fl. 33166.

According to your instructions, We are paying the following:

Dissolved year 09/19/03

09/19/04

Corporate filling fee.....\$ 150.00

Annual report fee.....\$ 61.25

\$ 211.25

09/19/05

Corporate filling fee.....\$ 150.00

Annual report fee.....\$ 61.25

\$ 211.25

May 01, 2006

Corporate Filling fee.....\$ 150.00

Certificate status desired \$ 8.25

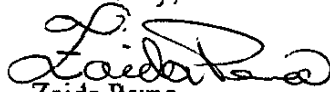
Total enclosed.....\$ 572.50

\$ 8.25

\$ 580.75

Thanks in advance for your help

Yours truly,



Zaida Perna

Mega Cargo & Assoc.

8375 N.W. 68th St.

Miami-Fl. 33166