

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 MAR -8 AM 9:35

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000128362

1. Corporation Name

D and G. transportation Inc.

600067944696
03/16/06--01006--001 **300.00

2. Principal Office Address

1331 NE 158 street

3. Mailing Office Address

Same as the above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

miami fl

City & State

Zip

Country

33162

Dade

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/02/02

5. FEI Number

16-1642326

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

Arnold DELVA.F

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

1331 NE 158 street

Suite, Apt. #, Etc.

City

miami

State
FL

Zip Code

33162

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

Arnold Gervais

REGISTERED AGENT MUST SIGN

Date

2-25-06

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
Pre.	Arnold DELVA.F	1331 NE 158 street	miami fl 33162
Vice	Arnold Gervais	1105 NW 126 street	miami fl 33168

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:

Arnold Gervais

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/25/06 (786) 487-4487

Daytime Phone #

Attn: Department of State
Division of Corporations

Re: Reinstatement of D & G Transportation, Inc.

I would like to apply to Reinstate D & G Transportation, Inc. I did not receive a notice to file annual report, therefore I am hereby enclosing a reinstatement corporation form with a check of \$300.00 to cover 2005 and 2006.

Thank you

A handwritten signature in black ink, consisting of several loops and a long horizontal stroke at the end.