

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

15 MAR 30 PM 4: 38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000128362

1. Corporation Name

D AND G TRANSPORTATION INC  
12145 NW 7<sup>th</sup> AVENUE  
MIAMI, FL 33168

2. Principal Office Address - No P.O. Box #

12145 NW 7<sup>th</sup> Ave

Suite, Apt. #, etc.

3. Mailing Office Address

12145 NW 7<sup>th</sup> Ave

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33168

Country

Miami Dade

Zip

33168

Country

Miami Dade

4. Date Incorporated or Qualified  
To Do Business in Florida

12/02/2002

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

EMMANUEL DELVA

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

12145 NW 7<sup>th</sup> Avenue

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33168

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

*Emmanuel Delva*

REGISTERED AGENT MUST SIGN

Date

3/26/2015

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|--------------------|
| P      | Emmanuel Delva                       | 12145 NW 7 <sup>th</sup> Ave                      | MIAMI, FL 33168    |
| VP     | ONYDER GERVAIS                       | 12145 NW 7 <sup>th</sup> Ave                      | MIAMI, FL 33168    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |

10. E-mail Address:

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

SIGNATURE:

*Emmanuel Delva*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/26/15 - 786-277-2793  
Date Daytime Phone

[Print](#)

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## **Fwd: Reinstatement Application Rejected - Document No: P02000128362 Tracking No: CR7824971806**

From: **angranjan2** (angranjan2@gmail.com)  
Sent: Thu 3/26/15 2:29 PM  
To: nicolmichael@hotmail.com

Sent from my T-Mobile 4G LTE Device

----- Original message -----

From: donotreply@sunbiz.org  
Date: 03/26/2015 8:44 AM (GMT-05:00)  
To: angranjan2@gmail.com  
Subject: Reinstatement Application Rejected - Document No: P02000128362 Tracking No: CR7824971806

Document Number: P02000128362

Reinstatement Tracking Number: CR7824971806

Your reinstatement could not be processed online, the business entity name listed above is no longer available. You must submit an amendment changing the name of your business entity with a completed reinstatement application, as well as the appropriate filing fees for each. Links to the amendment and reinstatement forms are indicated below.

When you have completed the reinstatement and amendment forms, attach a check and mail both forms together to: Florida Department of State, Division of Corporations, PO Box 6327, Tallahassee, FL 32314.

Make the check payable to the Florida Department of State.

If you have questions, please call the appropriate filing section. For Corporations, call 850-245-6059.

For Limited Liability Companies, Limited Partnerships, and Limited Liability Limited Partnerships, call 850-245-6051.

<http://form.sunbiz.org/pdf/cr2e011.pdf> Amendment Form

<http://form.sunbiz.org/pdf/cr2e081.pdf> Reinstatement Form

@ItsWorkingFL



The Department of State is leading the commemoration of Florida's 500th

15 MAR 30 AM 9:48  
OFFICE OF THE  
CLERK OF THE  
SUPREME COURT  
TALLAHASSEE, FL  
32314-0001