

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 APR -7 AM 10:26

RECEIVED  
DIVISION OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000134320

1. Corporation Name

TRAIN LAND INTERNATIONAL, INC.  
1982 STATE ROAD #44 #305  
NEW SMYRNA, FL 32168

W05-50213

REINSTATEMENT 04-06

CR2E081 (8/05)

2. Principal Office Address

1982 STATE ROAD #44

3. Mailing Office Address

1982 STATE ROAD #44

Suite, Apt. #, etc.

#305

Suite, Apt. #, etc.

City & State

NEW SMYRNA, FL

City & State

NEW SMYRNA, FL

Zip

32168

Country

USA

Zip

32168

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

01/02/2003

5. FEI Number

11-3680339

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

ODALIS GROOME

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

1982 STATE ROAD

Suite, Apt. #, Etc.

#44

500073510059

05/01/06--01059--001 \*\*\*450.00

City

NEW SMYRNA, FL

State

FL

Zip Code

32168

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

*Odalis Groome*  
REGISTERED AGENT MUST SIGN

Date 10/28/2005

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	ODALIS GROOME	1982 STATE ROAD #44	NEW SMYRNA, FL 32168
VP	SAMUEL GROOME	1982 STATE ROAD #44	NEW SMYRNA, FL 32168

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:

*Odalis Groome*

10/28/2005

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

212 302 6029

# TRAIN LAND, INTERNATIONAL, INC

1982 STATE ROAD 44 #305  
NEW SMYRNA BEACH, FLORIDA  
32168

Phone (386) 428-7077  
Fax (386) 428-4977

April 4, 2006

FLORIDA DEPT. OF STATE  
DIVISION OF CORPORATIONS

PLEASE WAIVE THE REINSTATEMENT FEE FOR THE ABOVE NAMED  
CORPORATION. WE DID NOT RECEIVE THE PRIOR NOTICES IN  
2004 AND 2005.  
ENCLOSED IS A REINSTATEMENT AND A CHECK FOR \$450.00.

SINCERELY,



ODALIS GROOME  
REGISTERED AGENT  
OFFICER