

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 DEC -8 PM 2:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P03000005556

1. Corporation Name

M & R Aircraft Accesories  
Service Inc.

2. Principal Office Address

2420 W PO ST

Suite, Apt. #, etc.

Bay # 2

City & State

Hialeah FL

Zip

33016

Country

USA

3. Mailing Office Address

2420 W PO ST

Suite, Apt. #, etc.

Bay # 2

City & State

Hialeah FL

Zip

33016

Country

USA

REINSTATEMENT 04

4. Date Incorporated or Qualified

To Do Business in Florida

1-15-03

5. FEI Number

481246539

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

Rodriguez, Herminia M.

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

2420 W PO ST.

Suite, Apt. #, Etc.

Bay # 2

City

Hialeah

State

FL

Zip Code

33016

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

Herminia M. Rodriguez

REGISTERED AGENT MUST SIGN

Date

10/25/04

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     | Rodriguez, Herminia               | 14755 SW 172 St.                               | Miami FL 33187     |
|        |                                   |  |                    |
|        |                                   |  |                    |
|        |                                   |  |                    |

000042367030  
11/01/04--01082--014 \*\*150.00

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:

Herminia M. Rodriguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/25/04

Date

Daytime Phone #

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

October 25, 2004

Division of Corporation  
P.O. Box 6327  
Tallahassee, FL 32314

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~~RE: M & R Aircraft Accessories Service Inc.~~  
Doc. # P03000005556

To Whom It May Concern:

This letter is to inform you that we never received the form for the re- instatement of our corporation. We have moved the company in February 2004 to a new location (see document attach for new address) and maybe this might have caused the form to be lost or misplaced by the postal service. We are also a new corporation, and I wasn't informed about this form. Can you please take this into consideration and waive the penalties???? I am enclosing a check for \$150.00(check # 2798). However if you have any questions, you can call me at 305-591-8200 Ext. 825.

Thank you for your co-operation.

Sincerely,



Herminia M. Rodriguez