

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 MAR -5 AM 8:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000012837

1. Corporation Name

M.T.E. TRUCKING CORP.

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

984 N.W. 106 Ave Cir

Suite, Apt. #, etc.

3. Mailing Office Address

984 NW 106 Ave. Cir.

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

Zip

33172

Country

U.S.A.

Zip

33172

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

02/03/2003

5. FEI Number

65-0778966

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

CALDERA NELLY

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

984 N.W. 106 Ave Circle

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33172

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

N Caldera

Date 1/02/2009

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	CALDERA NELLY	984 NW 106 Ave. Cir	MIAMI FL 33172
S	CALDERA NELLY	984 NW 106 Ave. Cir	MIAMI FL 33172
VP	CALDERA MAURICIO	984 NW 106 Ave. Cir	MIAMI FL 33172

700142348617
01/25/09--01005--001 **300.00

700142348617
03/05/09--01139--004 **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 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:

N Caldera

NELLY CALDERA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/02/2009

Date

786
470-5651

Daytime Phone #

January 2nd. 2009

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32314

Re. M.T.E. Trucking Corp.
P03000012837

To Whom it may concern:

The purpose of this letter is to inform you that the status of the company is inactive. I realize that and nor have we received annual report notice to file for the past two years.

After contacting your office we have learned that our company is inactive, and Therefore we are enclosing a form that I have printed out of the internet in order to Re-instate the name of our company as active and money order in enclosed.

We would like to respectfully request If you could kindly wave the penalties Imposed to us due the delay on the annual report filling of the past years.

Thank you in advance for your cooperation in this matter.

Sincerely yours,


Nelly Caldera
President