

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 APR 10 PM 1:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P03000041332**

1. Corporation Name

M.O.T. CAR'S INC

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

2626 Park St.

Suite, Apt. #, etc.

3. Mailing Office Address

6601 Shangrila Ln

Suite, Apt. #, etc.

City & State

LAKE WORTH

City & State

LANTANA - FL.

Zip

33460

Country

Palm Beach

Zip

33462

Country

Palm Beach

4. Date Incorporated or Qualified
To Do Business in Florida

4-9-03

5. FEI Number

75 3119343

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

DAVID J. Rupp

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

6601 Shangrila Ln

Suite, Apt. #, Etc.

City

LANTANA

State

FL

Zip Code

33462

Inactive Corp.

☒ 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.

Hannigans? (wipe out)

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

David J. Rupp

REGISTERED AGENT MUST SIGN

Date

4-7-08

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/D	DAVID J. Rupp	6601 Shangrila Ln	LANTANA, FL. 33462
VP & T	DeLainah Rupp	2626 Park St.	LAKE WORTH, FL. 33460

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:

David J. Rupp

P/D

4-7-08

561-533-7945

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

\$608.75 per TINA