

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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2007 NOV 16 PM 1:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		
DOCUMENT # P03000073137				
1. Corporation Name AMERICA FLORIDA TRUCKING, INC.				
2. Principal Office Address - No P.O. Box # 1703 Pastoral Way		3. Mailing Office Address 1703 Pastoral Way		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State Brandon, Florida		City & State Brandon, Florida		
Zip 33511	Country	Zip 33511	Country	
7. Name and Address of Current Registered Agent Name: SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 Southwest 22nd Street Suite, Apt. #, Etc. 4th Floor City Miami				
		State FL	Zip Code 33145	
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 By: <i>Natalia Utrera</i> 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
PSTD		Perez, Diosdado	1703 Pastoral Way	Brandon, Florida 33511
				400112462594 11/20/07-01042--010 **150.00
				REINSTATEMENT
				2007
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:		<i>Diosdado Perez</i>		Date 11-15-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #

SPIEGEL & UTRERA, P.A.

(Requestor's Name)

1840 SOUTHWEST 22 STREET, 4TH FLOOR

MIAMI, FL 33145 - (305) 854-6000

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S)

(if known):

OFFICE USE ONLY

1.	<u>AMERICA FLORIDA TRUCKING INC.</u>	P03000073137
	(Corporation Name)	(Document #)
2.	<u></u>	
	(Corporation Name)	(Document #)
3.	<u></u>	
	(Corporation Name)	(Document #)
4.	<u></u>	
	(Corporation Name)	(Document #)

Walk-In Pick up time _____ Certified Copy

Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
<input checked="" type="checkbox"/>	Reinstatement
	Trademark
	Other

Examiner's Initials