

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 APR 29 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000082715

1. Corporation Name

MET LOGISTIC, INC.

2. Principal Office Address

4101 NW 34TH AVE.

Suite, Apt. #, etc.

3. Mailing Office Address

4101 NW 34TH AVE

Suite, Apt. #, etc.

City & State

LAUDERDALE LAKES, FL

Zip

33309

Country

USA

City & State

LAUDERDALE LAKES, FL

Zip

33309

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

7/29/03

5. FEI Number

65-1199161

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 04-05

7. Name and Address of Current Registered Agent

Name

HOWARD ELLIS

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

4101 NW 34TH AVENUE

Suite, Apt. #, Etc.

City

LAUDERDALE LAKES

State

FL

Zip Code

33309

000054286360

05/11/05--01049--023 *\$30.00

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

REGISTERED AGENT MUST SIGN

Date

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
<u>D</u>	<u>HOWARD ELLIS</u>	<u>4101 NW 34TH AVENUE</u>	<u>LAUDERDALE LAKES, FL</u> <u>33309</u>

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:

HOWARD ELLIS CEO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-05 954486-2800

Date

Daytime Phone #

CR2E081 (01/05)

Met Logistic, Inc.
4101 NW 34th Avenue
Lauderdale Lakes, FL 33309

April 26, 2005

Reinstatement Department
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: P03000082715

Dear Sir or Madam:

After calling your office to find out what was needed to be paid since the corporation was showing as not active, we were informed that we had to send a letter explaining that we had never received the UBR2004.

Please be advised that we did not receive our UBR2004 and that the address on your file is incorrect. As per our conversation, in order to get the corporation in active status we needed to submit the UBR2005 along with the \$150 for this years renewal. I would like to request that the late fee is waved due to never receiving the UBR for 2004.

Enclosed is a check for \$300 to cover the renewal for 2004 and 2005. Please contact me if you need additional information.

Sincerely,

Howard Ellis, President

