

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

04 DEC 15 PM 3:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P03000Q33313

**1. Corporation Name**

Broward County Moving + Storage/Vanlines/  
Movers INC.

**2. Principal Office Address**

13993 SW 42ND St.

Suite, Apt. #, etc.

City & State

Davie FLA

Zip

33330

Country

**3. Mailing Office Address**

13993 SW 42ND St

Suite, Apt. #, etc.

City & State

Davie FLA

Zip

33330

Country

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

Nov, 17, 2003

**5. FEI Number**

61-1460417

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

Alan Horowitz

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

13993 SW 42 St

Suite, Apt. #, Etc.

City

Davie

State  
FL

Zip Code

33330

**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

X Alan Horowitz

REGISTERED AGENT MUST SIGN

Date

12/10/04

**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
Pres	Alan Horowitz	13993 SW 42 St	Davie FL 33330

**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 the signature shall have the same legal effect as if made under oath.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/10/04 (954) 444-4808  
Date Daytime Phone #

CR2E081 (01/04)

2002

Broward County Moving & Storage/Van Lines/Movers Inc.  
13993 SW 42<sup>ND</sup> Street  
Davie, Florida 33330  
954-423-9292 Phone  
954-370-0913 Fax

November 22, 2004

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

**RE: P03000133313**

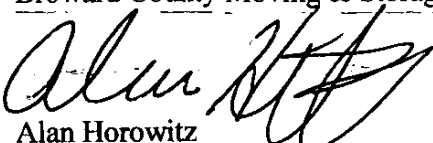
To Whom it May Concern,

In response to your letter number 104A00064040 we never received or renewal application in the mail. Our company has changed its location and the postmaster never forwarded the mail. Please note our new address for any future correspondents 13993 SW 42<sup>ND</sup> Street Davie, FL 33330.

Our company has also changed its registered agent from Michael D. Toubail to Alan Horowitz. Enclosed is a check for \$150.00 (one hundred fifty) for the annual report fee.

Should you have any questions or need further clarifications, please do not hesitate to contact our office.

Sincerely,  
Broward County Moving & Storage

  
Alan Horowitz  
Registered Agent