FROM : PHONE NO. : Nov. 08 2005 02:32PM P1/2

APPROVED AND FILED
06 APR 28
09 MAY 26 AM 10:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P04000063619

800074338268
05/10/06--01022--016 **300.00

1. Corporation Name

A & H MENDIOLA TRUCKING, INC.
P. O. Box 452
Jennings, FL 32053

REINSTATEMENT 05-06

CR2E081 (12/05)

2. Principal Office Address	3. Mailing Office Address
P. O. Box 452	P. O. Box 452
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Jennings, FL	Jennings, FL
Zip: 32053 Country: USA	Zip: 32053 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 4/16/2004

5. FEI Number: 84-1644391 ☐ 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: Abel R. Mendiola

Street Address (P.O. Box Number is Not Acceptable): 6747 27th Avenue, NW

Suite, Apt. #, Etc.:

City: Jennings State: FL Zip Code: 32053

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: [signature] Date: 4/25/06

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
P	Abel R. Mendiola	6747 27th Avenue, NW	Jennings, FL 32053

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: [signature] Date: 4/25/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #

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A & H Mendiola Trucking, Inc
P. O. Box 452
Jennings, FL 32053

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

April 25, 2006

RE: Corporation Reinstatement
A & H Mendiola Trucking, Inc.
EIN: 84-1644391

Dear Sirs/Madam:

I am writing this letter requesting to be reinstated as a corporation. Our corporation never received the annual report for the year 2005 as we had moved to Jennings, Florida.

I am enclosing a Corporation Reinstatement Form and a check in the amount of $300.00 to reinstate my corporation for 2006.

Annual Report Fee	$ 61.25
Corporate Supplemental Fee	$ 88.75
Annual Fee for 2006	$150.00
Total	$300.00

Thanking you in advance for your prompt attention to this request.

Very truly yours,

ABEL MENDIOLA
President
A & H Mendiola Trucking, Inc.