

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 AUG 24 AM 8:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P04000086386**

1. Corporation Name

NEWMARK AUTO TRANSPORT CORPORATION

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

2524 NEWMARK DR.

Suite, Apt. #, etc.

City & State

DELTONA, FL

Zip

32738

Country

USA

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

DELTONA, FL

Zip

32738

Country

USA

REINSTATEMENT 05-07

4. Date Incorporated or Qualified
To Do Business in Florida

09-16-2005

5. FEI Number

51-0510680

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

VALDERRAMA PARTNERS, LLC

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

1870 PROVIDENCE BLVD.

Suite, Apt. #, Etc.

SUITE K.

City

DELTONA

State

FL

Zip Code

32725

☒ 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.

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

Carla L.

REGISTERED AGENT MUST SIGN

Date

8-15-07

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	MERCEDES HERNANDEZ	2524 NEWMARK DR	DELTONA, FL 32738

200109595262
09/24/07--01029--018 **450.00

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:

Mercedes Hernandez - PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8-20-07 (386) 532-1630
Daytime Phone #

202

August 21, 2007

To Whom It May Concern:

We are the new registered agent of Newmark Auto Transport Corporation (P04000086386).

We are asking to waive the reinstatement fees, as our client never received any notice. Her previous partner is no longer a director and he was in charge of such matters.

Please update her corporation status as we have included a check for the amount of \$450.00 to reinstate her corporation, per one of your agents.

Sincerely,



Carlos Valderrama

Valderrama Partners, LLC
1870 Providence Blvd.
Deltona, FL 32725