

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 NOV 16 AM 11:20

DOCUMENT # P04000105327

1. Entity Name  
T & J TRANSPORT INC.



Principal Place of Business  
2802 PAR ROAD  
SEBRING, FL 33872 US

Mailing Address  
2802 PAR ROAD  
SEBRING, FL 33872 US



2. Principal Place of Business - No P.O. Box #  
2802 Par Rd  
Suite, Apt. #, etc.

3. Mailing Address  
2802 Par Rd  
Suite, Apt. #, etc.

11122007 REIN-P CR2E098 (1/07)

City & State  
Sebring FL  
Zip 33872 Country USA

City & State  
Sebring FL  
Zip 33872 Country USA

4. FEI Number  
74-3126295  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SOLANO, ANTONIO  
11216 SW 12 ST  
#101  
PEMBROKE PINES, FL 33025

7. Name and Address of New Registered Agent

Name Rebecca Solano Santa-Ana  
Street Address (P.O. Box Number is Not Acceptable)  
2802 Par Rd  
City Sebring FL Zip Code 33872

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Rebecca Solano Santa-Ana

11/13/07

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

(DATE)

FILE NOW!!! FEE IS \$750.00  
After January 1, 2008, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	SANTA-ANA SOLANO, REBECCA	
STREET ADDRESS	2802 PAR ROAD	
CITY-ST-ZIP	SEBRING, FL 33872	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	SANTA-ANA, JORGE	
STREET ADDRESS	2802 PAR ROAD	
CITY-ST-ZIP	SEBRING, FL 33872	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	500112352695	
CITY-ST-ZIP	11/16/07--01005--028 **750.00	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

REINSTATEMENT

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rebecca Solano Santa-Ana

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/13/07

Date

863-386-1125

Daytime Phone #