

Pg 1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

11 AUG 11 AM 8:38

SECRETARY OF STATE
CORPORATION DIVISION

DOCUMENT # P05000056389

1. Corporation Name

MOVING ON UP VAN LINES INC

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

18800 NE 29TH AVE

3. Mailing Office Address

1880 NE 29TH AVE APT 616

Suite, Apt. #, etc.

STE 616

Suite, Apt. #, etc.

STE 616

City & State

AVENTURA FL

City & State

AVENTURA FL

Zip

33180

Country

MIAMI

Zip

33180

Country

MIMIA

4. Date Incorporated or Qualified
To Do Business in Florida

04/18/2005

5. FEI Number

20-2686649

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

ITAMAR FRIEDMAN

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

1880 NE 29TH AVE

Suite, Apt. #, Etc.

STE 616

City

AVENTURA

State

FL

Zip Code

33180

100210296561
07/22/11--01041--018 **1508.75

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]
REGISTERED AGENT MUST SIGN

Date 07/18/2011

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	ITAMAR FRIEDMAN	1880 NE 29TH AVE APT 616	AVENTURA FL 33180

10. E-mail Address: *X Itamar_999@yahoo.com*

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: *X Itamar*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/18/2011 305-305-3712

Date

Daytime Phone #

S/Itamar

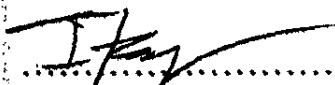
08/09/2011

Florida Division of Corporations

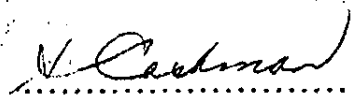
ATTN; Andy,

I, Itamar Friedman, of 1880 NE Ave #616, Aventura Fl 33180, is hereby notifying the State of Florida Corporate Department, that I will not be revoking the dissolution of my company Moving On Up Van Lines Inc, document number P11000058103.

If you have any questions, please do not hesitate to call my agent Wendy Carter at 305-652-9990 or fax 305-651-7030 or email her at wccater@carrierservice.com any questions, you may have or to call me at 305-305-3712.



.....
Itamar Friedman



..... (Notary Signature)

Susan Cashman

Expires 08/25/2012

