

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 JUN 23 PM 2:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P93000054034

**1. Corporation Name**

SOUTHWEST RENTAL CORP.

**2. Principal Office Address**

1801 S. PENNSYLVANIA AVENUE

Suite, Apt. #, etc.

**3. Mailing Office Address**

P. O. BOX 299

Suite, Apt. #, etc.

**City & State**

MORRISVILLE, PA

**City & State**

MORRISVILLE, PA

**Zip**

19067-0299

**Country**

BUCKS

**Zip**

19067-0299

**Country**

BUCKS

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

8/2/1993

**5. FEI Number**

65-0426467

**Applied For**

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☒

\$8.75 Additional Fee required  
for a Certificate of Status

**REINSTATEMENT 03-04**

**7. Name and Address of Current Registered Agent**

**Name**

STEPHEN R. TRANOVICH

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

4811 ISLAND POND CT.

**Suite, Apt. #, Etc.**

SUITE 1003

**City**

BONITA SPRINGS

**State**

FL

**Zip Code**

33923

**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

*Stephen R. Tranovich*  
REGISTERED AGENT MUST SIGN

Date

6/21/04

**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
PTSD	THOMAS S. TRANOVICH	1801 S. PENNSYLVANIA AVENUE	MORRISVILLE, PA 19067-0299

200038202382

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

**SIGNATURE:**

*Thomas S. Tranovich*  
THOMAS S. TRANOVICH  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/21/04

610-205-6046

Daytime Phone #

CR2E081 (10/02)



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 766579 4365966

AUTHORIZATION : Patricia Pizeto

COST LIMIT : \$ 908.75

ORDER DATE : June 21, 2004

ORDER TIME : 10:57 AM

ORDER NO. : 766579-010

CUSTOMER NO: 4365966

CUSTOMER: Heather Jagaczewski, Paralegal  
Stevens & Lee  
P.o. Box 679

Reading, PA 19603-0679

DOMESTIC FILINGS

NAME: SOUTHWEST RENTAL CORP.

DIVISION OF CORPORATION

04 JUN 23 PM 12:53

RECEIVED

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward

EXAMINER'S INITIALS \_\_\_\_\_