PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 JAN -3 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000082692**

1. Corporation Name

SERVI CARGO, INC.

Principal Place of Business	Mailing Address
~~2121 NW 79TH AVE~~ ~~SUITE 10~~ ~~MIAMI FL 33122~~ ~~US~~	~~2121 NW 79TH AVE~~ ~~SUITE 10~~ ~~MIAMI FL 33122~~ ~~US~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 99 LC

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
7950 NW 77th St	7950 NW 77th St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, FL	City & State: Miami, FL
Zip: 33166 Country: US	Zip: 33166 Country: US

4. Date Incorporated or Qualified To Do Business in Florida: 12/03/1993

5. FEI Number: 65-0454935 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
~~P~~	~~RULLI, FERNANDO~~	~~2121 NW 79TH AVE~~	~~MIAMI FL~~
~~RA~~	~~FERER, PETRONA~~	~~5730 SW 38TH ST~~	~~MIAMI FL~~
P	Thalia Reyes	7950 NW 77th St.	Miami FL 33166

500003095295--1
-01/11/00--01101--003
****750.00 ****750.00

500003095295--1
-01/11/00--01101--010
****150.00 ****150.00

8. Name and Address of Current Registered Agent

~~FERRER, MENA P~~
~~2121 N.W. 79TH AVE~~
~~SUITE 10~~
~~MIAMI FL 33122~~

9. Name and Address of New Registered Agent

Name: Thalia Reyes
Street Address (P.O. Box Number is Not Acceptable): Thalia Reyes 3640 N.W. 9th St.
Suite, Apt. #, Etc.: Apt. #507
City: Miami State: FL Zip Code: 33125

10. I, being appointed the registered agent of the above named corporation, familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Thalia Reyes REGISTERED AGENT Date: 11/19/99

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., 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.

KE

SIGNATURE: S
SIGNATURE AND TYPED OR P SIGN HERE
Thalia Reyes

6/15/99 Date
305-594-2907 Daytime Phone #

0042503