

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**96-97 AR**

REINSTATEMENT APPLICATION  
B. Mortham  
State  
DIVISION OF CORPORATIONS

DOCUMENT # **PC45000012701**

1. Corporation Name

**Carrera One Automotive Inc.**

Principal Place of Business

Mailing Address

**6043 N.W. 167 ST A-13  
Miami, Fla 33015**

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

**02-95**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

**65-0562284**

Applied For

City & State

City & State

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required for a Certificate of Status**

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

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
<b>President</b>	<b>Andrew Varona</b>	<b>14740 SW 51 Terr</b>	<b>Miami, Fla 33185</b>
			<b>600002125356--6</b>
			<b>-03/26/97--01132--016</b>
			<b>****365.00 ****365.00</b>

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

<b>Andrew Varona</b> <b>14740 SW 51 Terr</b> <b>Miami, FL 33185</b>	Name
	Street Address (P.O. Box Number is Not Acceptable)
	Suite, Apt. #, Etc.
	City
	State
	Zip Code

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

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date **03-18-97**

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information on intangible tax.)

12. 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:

**Andrew Varona**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**03-18-97**  
Date

**(305) 825-7467**  
Daytime Phone #

CR2E040 (1/96)

**CARRERA ONE AUTOMOTIVE**

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6043 N.W. 167 ST. A#13  
MIAMI, FL. 33015  
DADE

Phone 305-825-7153  
Fax 305-825-7467

March 19, 1997

TO: DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FL 32314  
REINSTATEMENT DIVISION

FROM: CARRERA ONE AUTO  
6043 N.W. 167 STREET  
MIAMI, FLORIDA 33015

TO WHOM IT MAY CONCERN:

IT CAME TO MY ATTENTION BY MY ATTORNEY THAT MY CORPORATION WAS DISSOLVED AS OF AUGUST OF 1996, I CALLED THE DIVISION OF CORPORATION AND ASKED FOR THE REASON FOR THIS ACTION. I WAS TOLD THAT MY REINSTATEMENT FEE WAS NOT PAID. THIS LETTER IS TO EXPLAIN AND DOCUMENT THAT I NEVER RECEIVED ANY CORRESPONDENCE FROM YOUR OFFICE AT ANY TIME DURING LAST YEAR. I CONTACTED MY ATTORNEY AND HE ALSO HAS NOT RECEIVED ANYTHING IN REGARDS TO THIS. I DONT THINK ITS ETHICAL TO HAVE TO PAY A PENALTY FOR SOMETHING WISH I HAVE NO CONTROL OVER. I AM ENCLOSING A CHECK FOR \$365.00 WISH SHOULD COVER FOR 1996 AND 1997 FEES.

SINCERELY,

  
ANDREW VARONA