


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

DOCUMENT # P95000016740

1. Corporation Name
LAD EXPRESS, INC.

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Principal Place of Business 694 N.W. 103RD ST. MIAMI FL 33150	Mailing Address 694 N.W. 103RD ST. MIAMI FL 33150
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REINSTATEMENT 97

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

2. New Principal Office Address, If Applicable 5815 HALLANDALE BLVD Suite, Apt. #, etc.	3. New Mailing Office Address, If Applicable Suite, Apt. #, etc.
City & State HALLANDALE, FL	City & State
Zip 33023	Country BROWARD

4. Date Incorporated or Qualified To Do Business in Florida 03/01/1995	
5. FEI Number 65-0566054	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DPST	LADIWALA, NIZAR	694 N.W. 103RD ST.	MIAMI FL 33150
V	LADIWALA, RAFIQ R. RAFIQ R.	5815 HALLANDALE BCH BLVD	HOLLYWOODS FL

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 *****750.00 *****750.00

8. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES INC.
 1201 HAYS ST.
 TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name
RAFIQ R. LADIWALA

Street Address (P.O. Box Number Is Not Acceptable)
5815 HALLANDALE BLVD.

Suite, Apt. #, Etc.

City
HALLANDALE

State
FL

Zip Code
33023

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 Rafiq Ladiwala Date 10-28-97
 REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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: Rafiq Ladiwala Date 10/28/97
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E040 (8/97)