

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # P95000033413

1. Corporation Name

SOUTHERN TRADING AND LOGISTICS, INC.

FILED

97 OCT 23 AM 11:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

7364 S.W. 135 CT.
MIAMI, FL 33183

SAME

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

2. New Principal Office Address, If Applicable

7450 MIAMI LAKES DRIVE

Suite, Apt. #, etc.

SUITE C-107

City & State

MIAMI LAKES, FLORIDA

Zip

33014

Country

U.S.A.

3. New Mailing Office Address, If Applicable

7450 MIAMI LAKES DR.

Suite, Apt. #, etc.

SUITE C-107

City & State

MIAMI LAKES, FLORIDA

Zip

33014

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

04/28/95

5. FEI Number

XX

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT

96-97

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PRESID.	ANA S. BALAREZO	7450 MIAMI LAKES DR., #C-107	MIAMI LAKES, FL 33014
SECRET.	LUIS E. BALAREZO	7450 MIAMI LAKES DR., #c-107	MIAMI LAKES, FL 33014

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****915.00 ****915.00

8. Name and Address of Current Registered Agent

LUIS E. BALAREZO
7364 S.W. 135 CT.
MIAMI, FL 33183

9. Name and Address of New Registered Agent

Name

LUIS E. BALAREZO

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

7450 MIAMI LAKES DR., # C-107

Suite, Apt. #, Etc.

C-107

City

MIAMI LAKES,

State

FL

Zip Code

33014

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 10/20/97

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:

LUIS E. BALAREZO

10/20/97

(305) 558-2471

Date

Daytime Phone #