

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 # P95000050187

02 JAN 14 AM 11:19

1. Corporation Name

MEDCO TRANSPORTATION SERVICES, INC.

Principal Place of Business

Mailing Address

5915 SW 108TH PLACE
MIAMI, FL 33173

P.O. Box 0776
MIAMI FL 33144

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable

3. New Mailing Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

6/26/95

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0606849

Applied For

Not Applicable

City & State

City & State

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 (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
P.D	ELIZA C. VALENTI	5915 SW 108TH PLACE	MIAMI, FL 33173

700004792887--7
-01/23/02--01106--009
****300.00 ****300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ELIZA C. VALENTI
5915 SW 108TH PLACE
MIAMI FL 33173

Name

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

Suite, Apt. #, Etc.

City

State
FL

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

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Eliza Carlisle Valenti

1/10/02 305-271-4424

CR2E040 (12/95)

MEDCO

TRANSPORTATION SERVICES, INC.

January 10, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 6327
Tallahassee, FL 32314

Ref: Document # P95000050187
Year 2001

To whom it may concern:

I am writing this letter due to the fact that I have not received a Uniform Business Report (URB)-for the year 2001. Enclosed please find check # 3122 in the amount of \$300.00 for the Uniform Business Report (URB) for the year 2001 & 2002.

Please consider the situation mentioned above and I hereby respectfully request that the penalty fee be waived.

Thank you in advance for your support in this matter, if any further information is needed, please feel free to contact me at (305) 271-4424.

Sincerely,

Eliza C. Valenti
President

URB, 2001 & 2002



(800)330-8350

(305)271-4424 (Dade)

(305)271-2457 (Fax)

P.O. Box 0776, Miami, Florida 33144