

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**APPLICATION
FOR
REINSTATEMENT**



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

APPROVED
AND
FILED

1997 NOV -3 PM 4:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000053954

1. Corporation Name
Bear Transportation, Inc.

Principal Place of Business Mailing Address
**5825 NW 74th Avenue
Miami, FL 33166**

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 7/10/95	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-0592468	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	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)

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
Dir	Alvaro M. Vazquez	5825 NW 74th Avenue	Miami, FL 33166
Asst Sec.	Karen B. Rozar	1201 Hays Street	Tallahassee, FL 32301

REINSTATEMENT

8. Name and Address of Current Registered Agent

**Alvaro M. Vazquez
5825 NW 74th Avenue
Miami, FL 33166**

9. Name and Address of New Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
Suite, Apt. #, Etc.
City **Tallahassee** State **FL** Zip Code **32301**

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 **Karen B. Rozar** **Karen B. Rozar, As Its Agent**
REGISTERED AGENT MUST SIGN

Date **11-3-97**

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: **Karen B. Rozar**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **11-3-97** Daytime Phone #

CR2E040 (12/96)



ACCOUNT NO. : 072100000032

REFERENCE : 586769 92490A

AUTHORIZATION : *Patricia Pappas*

COST LIMIT : \$ 758.75

ORDER DATE : November 3, 1997

ORDER TIME : 2:40 PM

ORDER NO. : 586769-005

CUSTOMER NO: 92490A

CUSTOMER: Gerardo A. Vazquez, Esq
Profilet & Associates
Suite 407
501 Brickell Key Drive
Miami, FL 33131

DOMESTIC FILINGS

NAME: BEAR TRANSPORTATION, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Glisar

EXAMINER'S INITIALS _____

File

DIVISION OF CORPORATION

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