PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FOR MICHAELD					
APPLICATION SEE FLORIDA DEPARTMENT OF S		NT OF STATE		AND	
FOR 9/0-98	Sandra B. Mo		A	, astri	
REINSTATEMENT	Secretary of Solvision of Corpo		ا 98	EB-2 MIII: 12	
			SECRETARY		
DOCUMENT # 195 DODD 62504			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
APPROACH TRANSPORT LINES, INC.				TE, PLORIDA	
				`	
Principal Place of Business	Mailing Address				
8760 SW 133RD AVE.RD. 8760 SW 133RD AVE. RD. SUITE# 123 SUITE# 123					
MIAMI, FL 33183 MIAMI, FL 33183					
# above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, if Applicable 3. New Malling Office Address, if Applicable			Date Incorporated or Qualified		
8760 SW 133RD AVE.RD.	8760 SW 133RD AVE.RD.		To Do Business in Florida 08/14/95		
# 123 City & State	# 123 City & State	<u> </u>	5. FEI Number 65-0602720	Applied F	
MIAMI,FL	MIAMI,FL		6.	\$8.75 Additional Fee re	
Zip Country U.S.A.	Zip Count 33183	U.S.A.	CERTIFICATE OF STATUS DESI	for a Certificate of Sta	quired atus
7. Names and Street Addresses of Each Officer and/o		•	st 3 directors)		
Title(s) Name of Officers and/or Directors	i o	reet Address of Each fficer and/or Director Ise Post Office Box No	umbers) 4	City / State / Zip	
JOSE MANUEL DE VALLE ,JR 8760 SW 133RD AVE				FL 33183	
	·			- 11 1001	
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DEMICTA			TERMENIT OF		
REINSTA			E ENTE IN 1 90	- 98	
				alan	
				12/198	
				$1 \propto 10$	
8. Name and Address of Current R	legistered Agent		9. Name and Address of New	Registered Agent	
			MANUEL DE VALLE, JR		
8760 SW 133RD AVE.RD. SUITE#123	Street Address (P.O. Box Number is Not Acceptable) 8760 SW 133RD AVE.RD.			CR2E040 (1.98)	
MIAMI,FL 33183		Suite, Apt. #, Etc. SUITE# 123			\g
		City	11 223	State Zip Code	
MIAMI 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obli			gations of Section 607.0505, F.S	FL 33183	-
Signature of	D11111 1.				
Registered Agent Agent RE	SISTERED AGENT MUST SIGN		Date	01/31/98	
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 dertify that it 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 filling 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 own 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. JOSE MANUEL DE VALLE, JR					
SIGNATURE: 01/31/98 (305)385-0296 PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #					

・養養の実施の対象を行って表します。「そのではない」が必要するとなる。「あるのはない」というと考えてスプレーにおいることできました。ことに、これに、そのできるできる。これできるとうない。

かいこと 日常の間で見かい かいとう 美麗寺 アンタボス こうかい こうきゅうごう けいしい