

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P95000076268			
1. Corporation Name Universal Tractor, Inc.			
Principal Place of Business		Mailing Address	
709 Waltham ave Orlando, Florida 32809			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, If Applicable 709 Waltham Ave		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Orlando, Florida		City & State	
Zip 32809	Country U.S	Zip	Country
		4. Date Incorporated or Qualified To Do Business in Florida 10/05/95	
		5. FEI Number 52-2140380	Applied For Not Applicable
		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
Press	Maria Cruz	709 Waltham Ave	Orlando, florida 32809
Vice-Prs	Dilcia E. Ortega	709 Waltham Ave	Orlando, Florida 32809
Sectr	Dilcia E. Ortega	709 Waltham Ave	Orlando, Florida 32809
Treass	Maria Cruz	709 Waltham Ave	Orlando, Florida 32809
REINSTATEMENT 99-99			
RF 4-1-99			
8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Miguel Rodriguez 3399 Ponce De Leon Blvd #101 Coral Gables, Florida 33134		Name Maria Cruz Street Address (P.O. Box Number is Not Acceptable) 709 Waltham ave Suite, Apt. #, Etc. City Orlando State FL Zip Code 32809	
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 <i>Maria Cruz</i>		Date 03/30/99	
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: <i>Maria Cruz</i> MARIA CRUZ		03/30/99	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CP2E04011/96