

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JAN 12 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000081742

1. Corporation Name

Southern Transportation Investments,
INC.

2. Principal Office Address

9802 Compass Point Way

Suite, Apt. #, etc.

City & State

TAMPA, FL

Zip

33615

Country

USA

3. Mailing Office Address

9802 Compass Point Way

Suite, Apt. #, etc.

City & State

TAMPA, FL

Zip

33615

Country

USA

STATEMENT 03

500026640029

01/12/04--01004--017 **758.75

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

593347713

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

George K. Rucker

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

9802 COMPASS POINT WAY

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33615

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

George K. Rucker

REGISTERED AGENT MUST SIGN

Date

1/7/04

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P, D	<u>George K. Rucker</u>	<u>9802 Compass Point Way</u>	<u>Tampa, FL 33615</u>
V, D	<u>Teresa C. Flowers</u>	<u>18705 Skysail Court</u>	<u>Cornelius, N.C. 28031</u>

10. 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:

George K. Rucker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/7/04 813-310-4987

Daytime Phone #

CR2E081 (10/02)