

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

97 NOV 17 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000060289

1. Corporation Name

DEDEX EXPRESS, INC.

Principal Place of Business

Mailing Address

FAIRWAY FINACIAL CENTER
10 FAIRWAY DRIVE SUITE 110
DEERFIELD BEACH, FL 33441

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

2. New Principal Office Address, If Applicable

10282 BOCA ENTRADA BWD

Suite, Apt. #, etc.

210

City & State

BOCA RATON, FL

Zip

33428

Country

3. New Mailing Office Address, If Applicable

SAME AS PRINCIPAL

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

July 196

5. FEI Number

65 0680399

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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PRESID	MARCELLO LUIS VARGAS	10282 BOCA ENTRADA # 210	BOCA RATON, FL 33428
VP	JUCILEIDE C. MARTINS	10282 BOCA ENTRADA # 210	BOCA RATON, FL 33428
S	JUCILEIDE C. MARTINS	SAME ABOVE	SAME ABOVE

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****758.75 ****758.75

BA 11/18

8. Name and Address of Current Registered Agent

MARCELLO LUIS VARGAS
10282 BOCA ENTRADA BWD
210
BOCA RATON, FL 33428

9. Name and Address of New Registered Agent

Name
MARCELLO LUIS VARGAS
Street Address (P.O. Box Number is Not Acceptable)
10282 BOCA ENTRADA BWD # 210
Suite, Apt. #, Etc.
210
City
BOCA RATON
State
FL
Zip Code
33428

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 11/10/97

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:

MARCELLO LUIS VARGAS

11/13/97 954-418-8980

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

C-925060 (12-96)