

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 FEB 28 PM 4:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000076165

1. Corporation Name

2002-03

NATIONAL Automotive Transporters Inc.

2. Principal Office Address

3310 SW 11<sup>th</sup> St

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Deerfield Beach

City & State

Zip

33442

Country

Zip

Country

000013989810

03/12/03--01043--004 \*\*300.00

4. Date Incorporated or Qualified  
To Do Business in Florida

9-12-96

5. FEI Number

65099091

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

BRIAN FREY

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

3310 SW 11<sup>th</sup> St

Suite, Apt. #, Etc.

City

Deerfield Beach

State

FL

Zip Code

33442

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

[Signature]

Date

2-25-03

REGISTERED AGENT MUST SIGN

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
Pres.	BRIAN FREY	3310 SW 11 <sup>th</sup> St	Deerfield Beach FL 33442

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:

[Signature]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-25-03

Date

984-868-0797

Daytime Phone #

CR2081 (10/02)

# **National Automotive Transporters Inc.**

National Automotive  
Transporters Inc.  
3310 SW 11th St.  
Deerfield Beach FL 33442

Phone: 954 570-8945  
FAX: 954 570-9882  
email: nblj@aol.com

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Wednesday, February 26, 2003

Department of Corporations  
Tallahassee FL.

To whom it may concern,

National Automotive Transporters Inc. Has not received the form for filing its corporate filing. NAT has moved from 10181 W. Sample Rd to 3310 SW 11th St Deerfield Beach FL. In February of 02. We notified the post office of this move and have received forwarded mail, but have received no mail from your office. We respectfully ask that the penalty be waived for this reason. I can be reached at daytime telephone of 954 868 0797. I appreciate any and all cooperation that you may give.

Brian Frey  
President

A handwritten signature in black ink, appearing to be 'BF', with a long horizontal line extending to the right.