

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1002

CORPORATION  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 FEB 19 PM 12:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000085172

1. Corporation Name  
PG Transport, Inc.

2. Principal Office Address

1170 Lee Wagner Blvd.

Suite, Apt. #, etc.  
Suite 107

City & State

Fort Lauderdale FL

Zip  
33315

Country  
Broward

3. Mailing Office Address  
same

Suite, Apt. #, etc.

City & State

4. Date Incorporated or Qualified  
To Do Business in Florida

10/15/1996

5. FEI Number

65-0708941

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

Pamela S. LaPress

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

1170 Lee Wagner Blvd.

Suite, Apt. #, Etc.

Suite 107

City

Fort Lauderdale

State  
FL

Zip Code  
33315

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

Pamela S.

REGISTERED AGENT MUST SIGN LaPress

Date 2/4/03

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
PSTD	Pamela S. LaPress	1170 Lee Wagner Blvd. Suite 107	Fort Lauderdale FL 33315

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pamela S. LaPress

2-4-03

Date

954 214 6853

Daytime Phone #

Cr2E001 (10/02)

2 of 2

February 4, 2003

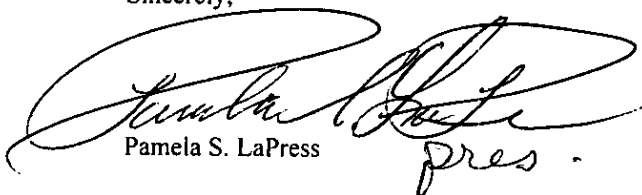
Florida Department Of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: PG TRANSPORT, INC.  
EIN # 65-0708941

To Whom It May Concern:

Please be advised , we never received the application for the Annual Corporate Fee of \$300.00.  
At this time please accept the \$300.00 to reinstate the corporation.

Sincerely,

  
Pamela S. LaPress  
pres.

300.<sup>00</sup> has already Been paid.  
8.<sup>75</sup> for Cit of good standing