

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 MAY 19 PM 12:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**

01-03



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000096130

1. Corporation Name

Trinidad & Tobago Air-Ocean Services, Inc.

2. Principal Office Address

12001 SW 79 Avenue

Suite, Apt. #, etc.

3. Mailing Office Address

12001 SW 79 Avenue

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33156

Country

USA

Zip

33156

Country

USA

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

11/25/1996

5. FEI Number

65-0707699

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

Jose R. Cazorla

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

12001 SW 79 Avenue

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33156

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

Date **5/12/2003**

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 |
|--------|--------------------------------------|---|----------------------|
| D/M | Jose R. Cazorla | 12001 SW 79 Avenue | Miami, Florida 33156 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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

Jose R. Cazorla

5/12/2003 (305) 790-8850

Date

Daytime Phone #

CR2E081 (10/02)

Miami August 15, 2003

Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314
Attention: Reinstatement Section

Re: Document No. P96000096130

Dear Sir or Madam:

On July of 2000 I sent your office a change of address advising that all further mailing should be addresses to our new location at 12001 SW 79 Avenue, Miami, FI 33156.

Since then, I have not been receiving the Annual reports at my new address. A couple of days ago it was brought to my attention that you are in the process of dissolving the corporation. During a brief conversation with one of your customer service agents on Thursday May 15th, 2003 I was advised that the named reports have been mailed to my old P. O. Box address. I was also advised to write this note to you and request a reinstatement of the company to make it current.

Kindly consider my enclosed reinstatement request. Attached herein you will also find a check for the total of \$ 450.00 to cover the Annual Report filings up to date for the years 2001, 2002 and current 2003.

Should you need any additional details or further information, please feel free to contact the undersigned.

Thanking you in advance for your assistance and compliance.

Sincerely,



Jose R. Cazorla
Director

Trinidad & Tobago Air-Ocean Services, Inc.
12001 SW 79 Avenue
Miami, Florida 33156
Tel. (305) 790-8850
Fax (305) 675-7888

cc: file
Gulf Bank