

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -6 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000098544**

1. Corporation Name

DAVID GUILLOT TRANSPORT, INC.

Principal Place of Business

Mailing Address

2605 BLUE BONNET STREET
ORLANDO FL 32807

2605 BLUE BONNET STREET
ORLANDO FL 32807



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

REINSTATEMENT 03
To Do Business in Florida

12/02/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

~~7600 S. Orange Ave~~ ^{AB}

~~P.O. Box 592158~~

~~Orlando, FL~~

~~Orlando, FL~~

Zip Country

Zip Country

~~32809 Orange~~

~~32859-2158 Orange~~

5. FEI Number

59-3413677

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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	GUILLOT, DAVID	2605 BLUE BONNET STREET	ORLANDO FL 32807

300024054979
10/23/03--01079--003 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GUILLOT, DAVID
2605 BLUE BONNET STREET
ORLANDO FL 32807

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of Registered Agent

[Signature]
SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10-21-03

11. 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David Guillot 11-3-03

Date

Daytime Phone #

407-857-7383

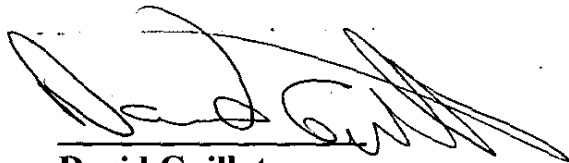
CR2E040 (7/03)

October 17th, 2003

To whom it may concern:

Please note that we did not receive notice to renew our license due to the fact that it was sent to the old address.

Thank you for your help and consideration in this matter.



David Guillot

President

David Guillot Transport, Inc.
