	PLEASE READ A	ALL INSTRUCTIONS	BEDGRE C	OMPLETI	NG THIS FORM."	•	
API REIN		FLORIDA DE A TAMENTO DIVIS DN OF LORPO	T F TATE		FILED 9 OCT 21 AMII: 2	3	
DOCUMENT # P97000021503				SECRETARY OF STATE TALLAHASSEE, FLORIDA			
1. Corporation Name R & K TRUCKING EXPRESS, INC.					enumasee LERM	FA	
•							
		Mailing Address 1748 SHOWER TREE WAY			T TATULATA NA 1811 1911 1911 BANK BANK BANK BANK BANK HARI AND		
WELLINGTON FL 33414 WELLINGTON FL 33414							
If above a	ddresses are incorrect in any way, line thro	ugh incorrect information and enter	correction below	}			
If above addresses are incorrect in any way, line through incorrect information and enter correction below. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable				Date Incorporated or Qualified To Do Business in Florida 03/10/1997			
1406 Whitefine VI		Suite, Apt. #, etc.	0 2 5. F		5. FEi Number		
Wellington H		City & State	$\frac{1}{6}$		65-0728887	Not Applicable Additional Fee required	
33	114 Country 5	Zip Countr	у	CERTIFICATE		a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each							
Title(s)	and/or Directors	3Of	Officer and/or Director		City / State / Zip		
D	PERRY-GONZALEZ, KARINA	1748 SHOWER 1	1748 SHOWER TREE WAY		WELLINGTON FL 33414		
]						
				4000030321448			
				-11702/9901044017 ****150.00 ****150.00			
8. Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent			
PERRY-GONZALEZ, KARINA				2 O. Boy Number is Not Acceptable)			
1748 SHOWER TREE WAY				Street Address (1.5. Dox Humber to Not Acceptation)			
WELLI	NGTON FL 33414						
10. I, being appointed the registered agent of the allove named corporation, am familiar with and accept the				State Zip Code FL			
10. I, being Signature o Registered	Agent Karinat	erry on	ith and accept the ol	bligations of Secti	on 607.0505, F.S. Date <u>10-13-</u>	99	
REGISTERED AGENT MUST SIGN							
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 807 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 ceth.							
SIGNATURE: KALING Perry Printed Ident 10_13-99 361793-8800 Designature and typed or Printed Name of SIGNING OFFICER OR DIRECTOR Date Detail Designation Designa							

AA21799

2

R & KTRUCKING EXPRESS Z PÉDE 1406 WHITE PINE DRIVE WELLINGTON, FL. 33414

July 13,1999

To Whom It May Concern:

Earlier today, I spoke to Andy, I explained that I just become a single Mom and a have to move to a different residence, and I did not recieve a renewal notice, perhaps due to the change of address. He told me to write a letter explaining and that late fees will be wake and to send a check on the amount of \$150.00 I really appreciate your consideration on this matter.

Should you have any question please feel free to contact me 561-793-8800

Sincerely

karina Perry

Enclosed is my check for the 1999 Annual Report in the amount of \$150.00

Please note that my new address is 1406 White Pine Drive wellington, fl. 33414