


H00000039235 7 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 JUL 27 AM 7:12

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000038300

1. Corporation Name
H.H. TRANSPORT USA INC.

2. Principal Office Address 8004 SW 149 Ave.		3. Mailing Office Address Same	
Suite, Apt. #, etc. Apt C-110		Suite, Apt. #, etc.	
City & State Miami, FL		City & State	
Zip 33193	Country	Zip	Country

REINSTATEMENT 98-00

4. Date Incorporated or Qualified To Do Business in Florida 04/29/97	
5. FEI Number 65-0771886	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name
ENRIQUE A. ARTILES

Street Address (P.O. Box Number is Not Acceptable)
8004 SW 149 Ave.

Suite, Apt. #, Etc.
Apt C-110

City Miami	State FL	Zip Code 33193
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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 *Enrique A. Artiles* Date 07/26/00

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
P/D	Enrique A. Artiles	8004 SW 149 Ave C-100	Miami, FL 33193

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)(f), 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: *Enrique A. Artiles* Date 07/26/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 922-4004

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

CORPORATION REINSTATEMENT

H.H. TRANSPORT USA INC.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$1,058.75