

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

01 NOV 28 PM 1:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000071744

1. Corporation Name

P.R. AIRCRAFT SERVICES, INC

Principal Place of Business

Mailing Address

4401 NW 74 AVE.
MIAMI FL 33166
US

19125 SW 177 AVE.
MIAMI FL 33187
US

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

4. Date Incorporated or Qualified
To Do Business in Florida

08/18/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0776029

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
PD	PEDRO, LORENZO	19125 S.W. 177 AVE.	MIAMI FL 33187
STD	RODRIGUEZ, RAUL	19125 S.W. 177 AVE.	MIAMI FL 33187
			300004719943--2 -12/12/01--01013--001 ****150.00 ****150.00
			11LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LORENZO, PEDRO
19125 SW 177 AVE.
MIAMI FL 33187

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.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10-24-2001

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PEDRO LORENZO

Date

10-24-2001

Daytime Phone #

786-
331-9053

208

P.R. AIRCRAFT SERVICE'S, INC.

**4401 N.W. 74th AVENUE
MIAMI, FLORIDA 33166
786-331-9053**

October 24, 2001


Florida Department of State
Division of Corporation:

Attn: Markitta

To It May Concern:

As per our conversation on the phone. I am sending you the copies of the papers to process our Division of Corporation papers. There is a copy of the cancelled check, a copy of the original division of Corporation paper and a copy of the first letter that I sent. The original monies that were sent were put into another companies account. You said that you would wave any fees and to send you another check for \$150.00. If you need any further information, please feel free to contact me.

Thank You,


Tina Lorenzo
Office Manager

TL/er