

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 APR 19 PM 1:30

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>P97000100064</u>			
1. Corporation Name <u>UNO Travel, Inc.</u>			
2. Principal Office Address - No P.O. Box # <u>7415 N.W. 19th STREET</u> Suite, Apt. #, etc. <u>Bay H</u> City & State <u>MIAMI FL</u> Zip <u>33126</u> Country <u>US</u>		3. Mailing Office Address <u>140 E. RIDGEWOOD AVENUE</u> Suite, Apt. #, etc. <u>40 NEXAR GROUP/T. BRAUN</u> City & State <u>PARAMUS, NJ</u> Zip <u>07652</u> Country <u>USA</u>	
7. Name and Address of Current Registered Agent Name <u>CT CORPORATION SYSTEM</u> Street Address (P.O. Box Number is Not Acceptable) <u>40 CT CORPORATION SYSTEM, 1200 SOUTH LINE ISLAND ROAD</u> Suite, Apt. #, Etc. City <u>PLANTATION, FL</u> State <u>FL</u> Zip Code <u>33324</u>			
4. Date Incorporated or Quiesced To Do Business in Florida <u>11/24/97</u>			
5. FEI Number <u>650830288</u>			
6. CERTIFICATE OF STATUS DESIRED ☐ ☒ <u>11/24/97</u>			
☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 917.0503, F.S. Signature of Registered Agent <u>ARB</u> <u>Arlene Bernal</u> Date <u>4/16/02</u> REGISTERED AGENT <u>Assistant Secretary</u>			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D/P	FRANK J. PETRILLI	140 E. RIDGEWOOD AVE. Param	PARAMUS, NJ 07652
D	MICHAEL SOLOMON	140 E. RIDGEWOOD AVE.	PARAMUS, NJ 07652
D	JOHN C. BRAUN, JR.	140 E. RIDGEWOOD AVE.	PARAMUS, NJ 07652
ASST S	LUIS VELEZ	140 E. RIDGEWOOD AVE.	PARAMUS, NJ 07652
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 contained in Chapter 119, 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: <u>Luis Velez</u> <u>Assistant Secretary</u> Date <u>4/16/02</u> 201.477.6065 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

FD-010 - 1/1/07 C Y System Called

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CORPORATION REINSTATEMENT

UNO TRAVEL, INC.

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