


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # PA70001021664			
1. Corporation Name Nationwide Movers Inc.			
2. Principal Office Address 4951 SW 34 Terr.		3. Mailing Office Address 5844 SW 25 street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Hollywood, FL.		City & State Hollywood, FL.	
Zip 33312	Country U.S.A	Zip 33023	Country U.S.A

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4. Date Incorporated or Qualified To Do Business in Florida 12/97	
5. FEI Number 650798300	Applied For <input checked="" type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name Josef Eshet	
Street Address (P.O. Box Number is Not Acceptable) 4951 SW 34 Terr	
Suite, Apt. #, Etc. 11/LS	
City Hollywood, FL.	State FL
Zip Code 33312	

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

Date

11/26/01

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	Josef Eshet	4951 SW 34 Terr	Hollywood, FL. 33312
VP	Nichole Eshet	4951 SW 34 Terr	Hollywood, FL 33312

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)(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:

Josef Eshet

Date

11/26/01

Daytime Phone #

954-763-7882

208
5844 SW 25 ST. Hollywood FL 33023
Ph: 954-763-7888
Fax: 954-987-3536

Nationwide Movers, Inc.

November 26, 2001

Department of State Division of Corporations
PO Box 6327
Tallahassee, Florida 32399

Re: Annual report

To whom it may concern:

We never received our annual report to be filled out for this year, because your office sent it to the wrong address. We have updated our address since 2-5-00. We would like if you would waive the reinstatement fee and other costs. Please see enclosed a check for \$150.00 and application. Thanking you in advance for your cooperation.

Sincerely,
Josef Eshet

