

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FLORIDA DEPARTMENT OF STATE



REINSTATEMENT

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 24 PM 2:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000059759

1. Corporation Name

AMERICAN TRANSPORT CENTER, INC.

Principal Place of Business

Mailing Address

5519 COMMERCE DR
#7
ORLANDO FL 32809
US

P O BOX 561107
ORLANDO FL 32856



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

07/06/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

NOT-APPLICABLE

Applied For

Not Applicable

City & State

Orlando Florida

City & State

Zip

32825

Country

USA

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	BISPLINGHOFF, MARTHA L	1221 N. PINE HILLS RD	ORLANDO FL 32808

600008576196
10/24/02--01099--012 **150.00

M/10/25

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BISPLINGHOFF, MARTHA L
1221 N PINE HILLS RD
ORLANDO FL 32808

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of Registered Agent

Martha L Bisplinghoff
REGISTERED AGENT MUST SIGN

Date

October 22, 2002

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)(l), 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:

Martha L Bisplinghoff
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

October 22, 2002

(407) 826 9000

American Transport Center Inc.
364 East Landstreet Road
Orlando Florida

October 22, 2002

To Whom it May Concern:

As the president of American Transport Center I have not recieved by mail the URB notices as of the above date. I request a reinstatement and am sending in the fee of one hundred and fifty dollars (150.00) with this letter of request.

Sincerely,



Martha Bisplinghoff
president

enclosure