

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

FILED

99 DEC 15 PM 3:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P98000071142

1. Corporation Name

COLUMBUS EXPRESS INC.

Principal Place of Business

Mailing Address

1458 N.W. 26TH ST.  
MIAMI FL 33142

1458 N.W. 26TH ST.  
MIAMI FL 33142

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

530 E. 36 St.

3. New Mailing Office Address, If Applicable

530 E. 36 St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hialeah, FL.

City & State

Hialeah, FL.

Zip

Country

Zip

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

08/14/1998

5. FEI Number

65-0856648

Applied For

Not Applicable

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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Salvador Ruiz.	530 E. 36 St.	Hialeah, FL. 33013

000009077760-1  
-12/22/99--01042--006  
\*\*\*150.00 \*\*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RUIS, SALVADOR  
1458 N.W. 26TH ST.  
MIAMI FL 33142

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

REQUIRED

Date 12-13-99

REGISTERED AGENT MUST SIGN

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.

KE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/13/99 305-968-9077  
Date Daytime Phone #

2

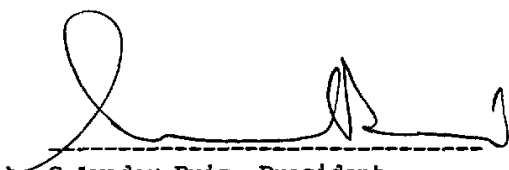
December 13th, 1999.

Department of State.  
Division of Corporations.  
P.O. Box 6327  
Tallahassee, Fl. 32314.

Dear Sir.:

The reason we are paying only, is because we call your department and we explained that we never received the original form and that this is the first year this corporation existed and for that reason I only sending you the original fee of \$ 150.00.

Respectfully.



Salvador Ruiz.-President.  
Columbus Express Inc.  
Document # P98000071142



Indalecio Gonzalez  
My Commission CC838201  
Expires June 23, 2003