## 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P98000098769  1. Entity Name NELCAR INTERNATIONAL INC.						FILED 06 OCT -9 PM 2: 42			
Principal Place of Busine 330 GOLFVIEW DRIVE FT LAUDERDALE, FL 33	330 GOLFVI	Mailing Address 330 GOLFVIEW DRIVE FT LAUDERDALE, FL 33326			LUGELIART OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business 3. N			. Mailing Address						
Suite, Apt. #, etc.	Suite, Apt. #	Suite, Apt. #, etc.			REIN-P	「飛行りです CR2E098 (11/05)	06.		
City & State	City & State			4. FEI Number 59-262	er	<del></del>	oplied For ot Applicable		
Zip	Country	Zip	Zip Count				S8.75 Add		
6. Nam	7. Name and Address of New Registered Agent Name								
TILLERO, NELSON 330 GOLFVIEW DF FT LAUDERDALE.				Street Adoress (P.O. Box Number is Not Acceptable)					
			City			FL Zip Cod	e		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent.								and accept	
SIGNATURE Signature, typest or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstating)  DATE									
FILE NOWIII FEE IS \$150.00 After January 1, 2007, Fee will be \$300.00						In accordance with corporation did no			
10. OFFICERS AND DIRECT			TORS 11.			CHANGES TO OFFICE	RS AND DIRECTOR	S IN 11	
STREET ADDRESS 330 GOI	TILLERO, NELSON RRET ADDRESS 330 GOLFVIEW DRIVE			LE ME REET ADORESS Y-ST-72P	111/13/4/116111113/11			Accition	
TITLE NAME SIREET ADDRESS CHY-ST-ZIP	Delete Titt NA STE						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete TITL NAM STREET						Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<b>9</b>	l l			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZP	Delete NTCC NAME STREE CITY				☐ Change ☐ Axidition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			3	l			☐ Change	Addition	
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or or an attachment with an address, with all other like empowered.    Nelson Tillero, President									