

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 JAN -2 PM 12:28

DOCUMENT # P99000032292

1. Corporation Name

H.B.R. TRANSPORT, INC.

Principal Place of Business

Mailing Address

3526 N.W. 32 ST
LAUDERDALE LAKES FL 33308

3526 N.W. 32 ST
LAUDERDALE LAKES FL 33308



REINSTATEMENT 01

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/08/1999

5. FEI Number

65-0901741

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	HOUSTON, ALEXANDER W	3526 N.W. 32 ST	LAUDERDALE LAKES FL 33308
D	HOUSTON, FELICIA M	3526 N.W. 32 ST	LAUDERDALE LAKES FL 33308
VPA	BLOCK, MICHAEL	3062 N ANDREWS AV	FORT LAUDERDALE FL 33309
VPA	Michael J. St. John	4401 West Federal Hwy Suite 202	Boca Raton Fla 33431
			600004769036--1 -01/11/02--01037-022 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

HOUSTON, ALEXANDER W
3526 N.W. 32 ST
LAUDERDALE LAKES FL 33308

9. Name and Address of New Registered Agent

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

Alexander W. Houston
REGISTERED AGENT MUST SIGN

Date 10-28-01

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.

SIGNATURE:

Alexander W. Houston
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12-05 01

CR2040 (8/01)