

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

00 OCT 18 PM 12:24

DOCUMENT # **P99000064589**

1. Corporation Name
NEW HORIZONS EXPRESS TRUCKING, INC.

Principal Place of Business	Mailing Address
8042 N.W. 66TH STREET MIAMI FL 33166	8042 N.W. 66TH STREET MIAMI FL 33166



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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07/21/1999	
City & State		City & State		5. FEI Number	
Zip		Country		65.0944603	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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
D	GARCES, ANTHONY	6019 NW 170 LA	MIAMI FL 33015
VP	Juan Carlos SANCHEZ	2347 SW 138 ST N	MIAMI FL 33175
VP	Maria Solis	6019 NW 170 LA	MIAMI FL 33015

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-10/26/00--01044--020
***158.75 ***158.75

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
GARCES, ANTHONY 8042 NW 66 ST MIAMI FL 33166		Name: SAME (ANTHONY GARCES) Street Address (P.O. Box Number is Not Acceptable): 8042 NW 66 ST Suite, Apt. #, Etc.: City: Miami State: FL Zip Code: 33166	

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: [Signature] Date: 10.11.00
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.

SIGNATURE: [Signature] ANTHONY GARCES Date: 10.11.00 Daytime Phone #: 305.592.5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E040 (8/00)

**NEW HORIZONS EXPRESS TRUCKING, INC.
8042 NW 66TH ST
MIAMI, FL 33166**

October 11, 2000

**FLORIDA DEPARTMENT OF STATE
Thelma Lewis
Corporate Specialist Supervisor**

Ref. #P99000064589

As per your letter dated Sep. 28, 2000 , in which you informed us of the cancellation of our corporation New Horizons Express Trucking, Inc. enclosed, please find supportive documents that on Feb 6, 2000, the Florida Department of State was informed of changes in the corporate structure and change of address.

On October 3, we spoke with Leslie Seller , and she told us that the address that the annual report/uniform business report was mailed to, was 7420 W 20th Ave, Hialeah, FI 33012 ; which is a completely incorrect address. On February 26 we submitted a letter with a change of address to: 4549 SW 129 Ave, Miami, FI 33175, to up-date your records.

We feel that it's unfair that a fee of \$750.00 has been charged to reinstate our corporation, despite our efforts to comply with the Department of State.

Please review our enclosed documentation and reconsider the reinstatement fee. Also please find check for the amount of \$158.75 that also includes fee for the Certificate of Status.

Sincerely,


**Anthony Garces
President**