

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

00-01-012

DOCUMENT # P99000109049

1. Corporation Name

ALEXIA TRANSPORTATION, INC.
5861 S.W. 21st Street
Hollywood, FL 33023

2. Principal Office Address

5861 S.W. 21st St.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hollywood, FL

City & State

Zip

Country

Zip

Country

33023

4. Date Incorporated or Qualified
To Do Business in Florida

12-17-99

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JILL GINSBERG PL

900004535819--0

-08/15/01--01025--008

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

3875 AMELFI DR.

****300.00 ****300.00

Suite, Apt. #, Etc.

City

Hollywood, FL

State
FL

Zip Code

33021

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 7/30/01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	JANE MANZELLA	4000 N.E. 168 St. #108	North Miami Bch, FL 33023
			SP

10. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-31-01 954-961-9696

CR20081 (9/00)

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ALEXIA TRANSPORTATION
5861 S. W. 21 Street
Hollywood, Florida 33023

July 31, 2001

Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

To Whom It May Concern:

Gentlemen:


Please be advised that we never received notice to file the annual reports for the corporation, nor did our registered agent inform us of same.

We apologize for our lateness and please be assured it will not be repeated.

Your cooperation is most appreciated.

Respectfully,

ALEXIA TRANSPORTATION



JANE MANZELLA
President

JM/ekc