PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 APR 12 PM 3:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S04186

1. Corporation Name
MIAMI FREIGHT & SHIPPING COMPANY

Principal Place of Business

Mailing Address

REINSTATEMENT 98-99

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

2. New Principal Office Address, If Applicable
8433 NW 72nd. Street
Suite, Apt. #, etc
City & State
Miami, FL
Zip 33166-2743 Country USA

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc
City & State
Zip
Country

4. Date Incorporated or Qualified To Do Business in Florida
06/24/76

5. FEI Number
59-1679158
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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PD	Johnston, Charles, H.	9710 SW 77th Street	Miami, FL 33173
D	Johnston, David	2 1/4 Windward	Kingston 16, Jamaica
D	Johnston, Merek	9710 SW 77th Street	Miami, FL 33176
D	Kennedy, Marjory	8433 N.W. 72nd. Street	Miami, FL 33166
S	Stinson, Louis, Jr.	4675 Ponce de Leon Blvd. Suite 305	Coral Gables, FL 33146

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****808.75 ****808.75

8. Name and Address of Current Registered Agent

Louis Stinson, Jr.
4675 Ponce de Leon Boulevard
Suite 305, Riviera Professional Bldg
Coral Gables, FL 33146

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 [signature]
REGISTERED AGENT MUST SIGN
Date April 7, 1999

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☐

(See other side for information on intangible tax.)

12. 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.

Louis Stinson, Jr., Secretary

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 7, 1999 (Date) 305-667-7571 (Daytime Phone #)

CR2E040 (1/98)