

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

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



V06282

FILED

99 FEB -5 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name V06282

O.C. Transport, Inc.

Principal Place of Business

Mailing Address

830 E. 28<sup>th</sup> St.

830 E. 28<sup>th</sup> St.

Mialeah, FL 33013

Mialeah, FL 33013

If above addresses are incorrect in any way, line through incorrect information and

REINSTATEMENT

1998.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Business Purpose or Qualified To Do Business

1/13/92

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

65-0306756

Not Applicable

City & State

City & State

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)

| 1. Title(s) | 2. Name of Officers and/or Directors | 3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | 4. City / State / Zip |
|-------------|--------------------------------------|--|-----------------------|
| DP          | Francisco Cruz                       | 830 E. 28 <sup>th</sup> St.<br>Mialeah, FL   | Mialeah, FL 33013     |
| DS          | Leslie Cruz                          | 830 E. 28 <sup>th</sup> St.  | Mialeah, FL 33013     |
| DVP         | Orlando E. Castaneda                 | 5267 SW 112 Ave.   | Miami, FL 33142       |
|             |                                      |  |                       |
|             |                                      |  |                       |
|             |                                      |  |                       |

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\*\*\*750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Francisco O. Cruz  
830 E. 28<sup>th</sup> St.  
Mialeah, FL 33013

Name

Marilene Canedo Esq.

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

75 Valencia Ave #400

Suite, Apt. #, Etc.

City

Carol Godes

State

Zip Code

FL

33131

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

Marilene Canedo

REGISTERED AGENT MUST SIGN

Date

1/29/98

11. This corporation owes 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Francisco Cruz

1/28/99

Date

Daytime Phone #

305 242 3260

CR2E001 (12/98)