

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

①

APPLICATION  
FOR



FLORIDA DEPARTMENT OF STATE  
97 AR  
Sandra S. Martinez  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

97 NOV -6 PM 2:43

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # V71604

1. Corporation Name

T.A. PARTS, INC

Principal Place of Business

6886 SW 59TH ST.  
MIAMI FL 33143

Mailing Address

6886 SW 59TH ST.  
MIAMI FL 33143



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

10/15/1992

5. FEI Number

65-0363899

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)

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
P	MURCIANO, CARLOS	6886 SW 59 ST	MIAMI FL

900002344639--7  
-11/12/97--01073--009  
\*\*\*\*175.00 \*\*\*\*175.00

8. Name and Address of Current Registered Agent

MURCIANO, CARLOS  
6886 SW 59TH ST.  
MIAMI FL 33143

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

*Carlos Murciano*  
REGISTERED AGENT MUST SIGN

Date

11/3/97

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.

SIGNATURE:

*Carlos Murciano*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/3/97

Daytime Phone #

(305)  
662-2691

CR2040 (9/97)

Nov 3, 1997

(2)

Division of Corporations  
Annual Report / Reinstatement Section  
P.O. Box 6327  
Tallahassee Fla 32314-6327

To Whom it may concern,

I received notice of dissolution of our corporation in the mail on Friday. I was very surprised. I had not previously received the 1st & 2nd ~~to~~ notifications that we should have gotten earlier in the year. We are a very small and struggling organization. We cannot afford a fine of this size - yet desperately need to keep these businesses open. Please accept these checks for \$175.00, the amount of the initial fee, to reinstate our corporation, and keep us in business.

Sincerely,  


Carlos Murciano  
President of TA Parts Inc (#V71604)  
and Sun Tech Aviation of the Americas Inc (P92000000766)