

MA25382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

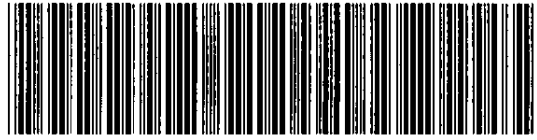
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PA-
AA-Change
[Signature]

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 FEB 19 PM 5:03

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cannon Express Inc ■
(Name of Corporation)

DOCUMENT NUMBER: EIN 59-2618944

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Ana Margarita Camps
(Name of Contact Person)

Cannon Express Inc
(Firm/Company)

5421 S W 155 Place
(Address)

Miami, Florida, 33185 USA
(City/State and Zip Code)

For further information concerning this matter, please call:

Ana Margarita Camps at (305) 559-2664/305-559-4394fax
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Note: I pay the \$150.00 per year to keep the name for sentimental reasons, my husband and I started together with the company and he passed away, the company itself has no activity.

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Cannon Express Inc
2. The principal office address: 5421 S W 155 Place (New address)
Miami, Florida, 33185 USA
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 01/03/1986 Document number: EIN 59-2618944
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Ana Margarita Camps
1904 N.W. 82 Avenue (Old address)
Miami, Florida, 33126 USA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Ana Margarita Camps (Keep same registered agent)
5421 S W 155 Place (New address)
(P.O. Box NOT acceptable)
Miami, Florida, 33185 USA

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer or director)

Ana Margarita Camps, DPTS
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

2/03/2009
(Date)

If signing on behalf of an entity:
N/A
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***