

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 02, 2009  
Secretary of State**

DOCUMENT# P01000115036

Entity Name: PENA TRUCKING & EXCAVATING, INC.

**Current Principal Place of Business:**

411 GOLDEN GATE BLVD WEST  
NAPLES, FL 341202168

**New Principal Place of Business:**

**Current Mailing Address:**

411 GOLDEN GATE BLVD WEST  
NAPLES, FL 341202168

**New Mailing Address:**

FEI Number: 65-1158240      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PENA, CARMEN  
411 GOLDEN GATE BLVD WEST  
NAPLES, FL 341202168 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CARMEN PENA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: PENA, GUILLERMO  
Address: 411 GOLDEN GATE BLVD WEST  
City-St-Zip: NAPLES, FL 341202135

Title: DVT ( ) Delete  
Name: PENA, CARMEN  
Address: 411 GOLDEN GATE BLVD WEST  
City-St-Zip: NAPLES, FL 341202168

Title: DS ( ) Delete  
Name: PENA, GUILLERMO A  
Address: 411 GOLDEN GATE BLVD WEST  
City-St-Zip: NAPLES, FL 341202168

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARMEN PENA

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

VP

10/02/2009

\_\_\_\_\_  
Date