PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

~~CORPORATION~~
~~REINSTATEMENT~~

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

FILED
03 DEC -5 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S60055

1. Corporation Name
G. & B. TRUCKING, CORP.

2003
4BR

2. Principal Office Address	3. Mailing Office Address
14655 60 Court North	14655 60 Court North
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Loxahatchee, Florida	City & State: Loxahatchee, Florida
Zip: 33470 Country: U.S.A.	Zip: 33470 Country: U.S.A.

500025256375
12/05/03--01040--025 **150.00

4. Date Incorporated or Qualified To Do Business in Florida: 06/06/1991

5. FEI Number: 65-0267379 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee Required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: GEORGE SANTIAGO

Street Address (P.O. Box Number is Not Acceptable): 14655 60 Court North

Suite, Apt. #, Etc.:

City: Loxahatchee | State: FL | Zip Code: 33470

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: George Santiago — REGISTERED AGENT MUST SIGN — Date: 11/24/2003

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	GEORGE SANTIAGO	14655 60 Court North	Loxahatchee Florida 33470

10. 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: George Santiago — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 11/24/2003 — Daytime Phone #: 1-954-868-6202