2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 13, 2009
Secretary of State

DOCUMENT# F02000001721

Entity Name: NORTH AMERICAN BUS INDUSTRIES INC.

Current Principal Place of Business:

106 NATIONAL DRIVE
ANNISTON, AL 36207

New Principal Place of Business:

Current Mailing Address:

106 NATIONAL DRIVE
ANNISTON, AL 36207

New Mailing Address:

FEI Number: 52-1792099 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: BRIAN DEWSNUP

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: CEO ( ) Delete
Name: SHAUGHNESSY, ROBERT
Address: 3510 TURTLE CREEK BLVD 4C
City-St-Zip: DALLAS, TX 75219

Title: V ( ) Delete
Name: CLARK, HERB
Address: 106 NATIONAL DRIVE
City-St-Zip: ANNISTON, AL 36207

Title: V ( ) Delete
Name: DOIG, BILL
Address: 106 NATIONAL DRIVE
City-St-Zip: ANNISTON, AL 36207

Title: ST ( ) Delete
Name: DEWSNUP, BRIAN
Address: 106 NATIONAL DR
City-St-Zip: ANNISTON, AL 36207

Title: CFO ( ) Delete
Name: YANACHIK, PAUL
Address: 106 NATIONAL DR
City-St-Zip: ANNISTON, AL 36207

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:

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: BRIAN DEWSNUP ST 10/13/2009

Electronic Signature of Signing Officer or Director — Date