## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F06000006110

Title:

Name:

Address:

City-St-Zip:

FILED Feb 27, 2008 Secretary of State

Entity Nam	1e: DANIEL M	OVING SYSTEMS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6025 LAGR ATLANTA,	ANGE BLVD S GA 30336	SW .			
Current Mailing Address:			New Mailing Address:		
6025 LAGR ATLANTA,	ANGE BLVD S GA 30336	SW .			
FEI Number:	58-2207522	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
2199 PONC	AGENT SERV DE DE LEON B BLES, FL 331	LVD STE 301			
The above in the State		ubmits this statement for the p	urpose of changing its register	ed office or registered agent, or both,	
SIGNATUR	RE: LOUIS STI	•			
	Electroni	c Signature of Registered Age	nt	Date	
Election Cam		(2)(b), F.S., the corporation did no Trust Fund Contribution(). ORS:	·	SES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:		Delete C E BLVD SW	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	CEO ( ) I DANIEL, BRAD ( 6025 LAGRANGI ATLANTA, GA 3	E BLVD SW	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DCEO () I DANIEL, PHILLIF 6025 LAGRANGI ATLANTA, GA 3	E BLVD SW	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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 an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LOUIS STINSON, JR. VΡ 02/27/2008

() Delete

2199 PONCE DE LEON BLVD STE 301

STINSON, LOUIS JR.

CORAL GABLES, FL 33134

() Change () Addition