2004 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED AND FILED

04 OCT 27 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

DOCUMENT # J91160

1. Entity Name
M & W TRUCKING CO. OF HILLSBOROUGH, INC.

Principal Place of Business	Mailing Address
10441 N HARNEY RD THONOTOSASSA, FL 33592 US	P.O. BOX 584 THONOTOSASSA, FL 33592

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

10232004 REIN-P CR2E098 (6/04)

4. FEI Number
59-2849127
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROBERT K EDDY
808 W DE LEON STREET
TAMPA, FL 33606

7. Name and Address of New Registered Agent

Name: MARVIN W. WYLY
Street Address (P.O. Box Number is Not Acceptable): 10601 LELAND HAWES RD
City: THONOTOSASSA FL Zip Code: 33592

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: John H. Miller 10-25-04
Signature, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After January 1, 2005, Fee will be $300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, JOHN H. 10602 LELAND HAVES RD. THONOTOSASSA, FL 33592	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WYLY, MARVIN 10601 LELAND HAWES RD THONOTOSASSA, FL 33592	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD MILLER, JOHN H. 16602 LELAND HAVES RD THONOTOSASSA, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 800042242028 10/27/04--01038--007 **158.75
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPSD WYLY, MARVIN 10601 LELAND HAWES RD THONOTOSASSA, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John H. Miller 10-25-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #