## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# K23896

Entity Name: PREFERRED COURIER SERVICES, INC.

FILED Oct 04, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3869 SW 99 AVE 17063 SW 215 TERR MIAMI, FL 33187

MIAMI, FL 33165

**Current Mailing Address: New Mailing Address:** 

P O BOX 55-8155 P O BOX 77-1445 MIAMI, FL 33255 US MIAMI, FL 333177 US

FEI Number: 65-0047344 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

GARCIA, ALEJANDRO M. 3869 SW 99 AVE BLDG 3 -STE 4 MIAMI, FL 33165 US

GARCIA, ALEJANDRO M. 17063 SW 215 TERR MIAMI, FL 33187

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ALEJANDRO M GARCIA 10/04/2005

> 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: ( ) Delete Title: (X) Change ( ) Addition

GARCIA, ALEJANDRO M., GARCIA, ALEJANDRO M., Name: Name: 3869 SW 99 AVE #3-4 17063 SW 215 TERR Address: Address: MIAMI, FL City-St-Zip: City-St-Zip: MIAMI, FL 33187 US

Title: (X) Delete Title: () Change () Addition

GARCIA, ALEJANDRO H., Name: Name: 3869 SW 99 AVENUE #3-5 Address: Address: MIAMI, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALEJANDRO M GARCIA DP 10/04/2005