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SECRETARY OF STATE

COVER LETTER

TO: A	unendment Section Division of Corporations	
SUBJEC	T: Cannon Express Inc (Name of Co	rporation)
DOCUM	ENT NUMBER: EIN 59-2618944	
	osed Statement of Change of Registered Office.	Agent and fee are submitted for filing.
Please ret	urn all correspondence concerning this matter	to the following:
	Ana Marga (Name of Con	arita Camps tact Person)
	Cannon E (Firm/Coi	express Inc
	5421 S W (Addre	155 Place
	Miami, Florie (City/State and	da, 33185 USA
For furthe	er information concerning this matter, please ca	all:
	Ana Margarita Campe	at (305) 550 2664/305 550 4304fa
***************************************	Ana Margarita Camps (Name of Contact Person)	at (<u>305</u>) <u>559-2664/305-559-4394fa</u> ; (Area Code & Daytime Telephone Number)
Enclosed	is a \$35.00 check made payable to the Departm	nent of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
reaso		o keep the name for sentimental together with the company and has no activity.

STATEMENT OF CHANGE OF REGISTERED OFFICE.OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Cannon Express Inc
2. The principal office address: 5421 S W 155 Place (New address)
Miami, Florida, 33185 USA
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 01/03/1986 Document number: EIN 59-2618944
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Ana Margarita Camps
1904 N.W. 82 Avenue (Old address)
Miami, Florida, 33126 USA
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Ana Margarita Camps (Keep same registered agent)
Ana Margarita Camps (Keep same registered agent) 5421 S W 155 Place (New address)
(P.O. Box NOT acceptable)
Miami, Florida, 33185 USA
The street address of its registered office and the street address of the business office of its registered gent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer or director) Ana Margarita Camps, DPTS (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)