## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P00000004864

Entity Name: CR & BN TRUCKING, INC.

FILED Jan 13, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

4139 SW 39 AVE. 10094 SW GLENBROOK DR. OCALA, FL 34474 PORT SAINT LUCIE, FL 34987

Current Mailing Address: New Mailing Address:

4139 SW 39 AVE. 10094 SW GLENBROOK DR. OCALA, FL 34474 PORT SAINT LUCIE, FL 34987

FEI Number: 65-0972825 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RIVERA, CESAR
4139 SW 39 AVE.
OCALA, FL 34474 US
RIVERA, CESAR
10094 SW GLENBROOK DR.
PORT SAINT LUCIE, FL 34987 US

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: RIVERA CESAR 01/13/2009

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:

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

 Name:
 RIVERA, CESAR
 Name:
 RIVERA, CESAR

 Address:
 4139 SW 49 AVE.
 Address:
 10094 SW GLENBROOK DR.

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:
 PORT SAINT LUCIE, FL 34987

Title: VS () Delete Title: VS (X) Change () Addition Name: BETSABE, NINO Name: BETSABE, NINO

 Address:
 4139 SW 49 AVE.
 Address:
 10094 SW GLENBROOK DR.

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:
 PORT SAINT LUCIE, FL 34987

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: RIVERA CESAR PSD 01/13/2009