

2005 FOR PROFIT CORPORATION REINSTATEMENT

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FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 04/14/05



DOCUMENT # P00000112858				1. Entity Name EXPRESS WINGS OF PINELLAS, INC.	
Principal Place of Business 2710 GULF TO BAY BLVD CLEARWATER, FL 33759		Mailing Address 2710 GULF TO BAY BLVD CLEARWATER, FL 33759			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3685747	Applied For Not Applicable
6. Name and Address of Current Registered Agent RYBAK, JOSEPH 2710 GULF TO BAY BLVD CLEARWATER, FL 33759			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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		JOSEPH F. RYBAK		3/14/2005	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)		DATE	
FILE NOW!!! FEE IS \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RYBAK, JOSEPH		NAME	JOSEPH F. RYBAK	
STREET ADDRESS	2710 GULF TO BAY BLVD		STREET ADDRESS	1719 BEACH BLVD LOT 1045	
CITY-ST-ZIP	CLEARWATER, FL 33759		CITY-ST-ZIP	JACKSONVILLE, FL 32250	
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RYBAK, KAREN		NAME		
STREET ADDRESS	2710 GULF TO BAY BLVD		STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER, FL 33759		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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:		JOSEPH F. RYBAK		PRESIDENT	
Signature and typed or printed name of signing officer or director		Date		3/14/2005 9042239196	

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EXPRESS WINGS OF PINELLAS

FIN 59-3685-947

14019 BEACH BLVD LUT 1045

JACKSONVILLE, FL 32250

To TIM ROBERTS

I am asking for a waiver on my
Renstatement as I did not receive any
notice for 2004. After going into
bankruptcy, I moved to JACKSONVILLE,

Thank you

Joseph Rybak President
(JOSEPH RYBAK)