

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

page 1 of 2

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 2007-1607 FD100002185			
1. Corporation Name BSX TRUCKING INC			
2. Principal Office Address 7000 SW 22nd CT Suite, Apt. #, etc. 143 City & State DAVIE FL Zip 33317 Country USA		3. Mailing Office Address SAME Suite, Apt. #, etc. City & State Zip Country	

FILED

02 DEC 23 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600009647046
12/23/02--01100--003 **150.00

4. Date Incorporated or Qualified To Do Business in Florida JAN-2001	
5. FEI Number 65-1064768	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> <small>See Instructions for Additional Fee and/or Certificate of Status</small>	

7. Name and Address of Current Registered Agent

Name SIGAL GABAY	
Street Address (P.O. Box Number is Not Acceptable) 7624 NW 5th ST	
Suite, Apt. #, Etc. 2E	
City PLANTATION	State FL
Zip Code 33324	

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date 12/18/02

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	SIGAL GABAY	7624 NW 5th ST	PLANTATION, FL 33324

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGAL GABAY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/18/02

Daytime Phone #

(351) 382-3390

BEST SERVICE XPRESS
1 - 800 - 273 - 9183

Page 205

December 19, 2002

Florida Department Of State
Corporation Reinstatement

BSX Trucking Inc.

According to Florida department of state our company is inactive as a result of not filing the annual report please be advise that we have never receive any paper work regarding this matter and we had no way of knowing that we are due for the report.

Enclosed are the necessary forms to reinstate the corporation.

Please corespond back to us with any necessary form that need to be filed if any.

Sincerely

Sagi Rokach