2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Feb 04, 2008
Secretary of State

DOCUMENT# P02000093191

Entity Name: MEDICAL EXPRESS SERVICES, INC.

Current Principal Place of Business:

6143 HIGH RIDGE ROAD
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

6143 HIGH RIDGE ROAD
LANTANA, FL 33462

New Mailing Address:

FEI Number: 11-3648433 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHUPURDY, KENNETH
6143 HIGH RIDGE ROAD
LANTANA, FL 33462 US

Name and Address of New Registered Agent:

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: KENNETH N CHUPURDY

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: VP ( ) Delete
Name: CHUPURDY, MARY C VP
Address: 6143 HIGH RIDGE ROAD
City-St-Zip: LANTANA, FL 33462 US

Title: PRES ( ) Delete
Name: CHUPURDY, KENNETH N PRES
Address: 6143 HIGH RIDGE ROAD
City-St-Zip: LANTANA, FL 33462 US

Title: SEC ( ) Delete
Name: WINDHAM, WADE A SEC
Address: 16790 LANCASHIRE DRIVE W
City-St-Zip: LOXAHATCHEE, FL 33470 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: KENNETH N CHUPURDY PRES 02/04/2008

Electronic Signature of Signing Officer or Director Date