2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000113178

Entity Name: WORLDWIDE MOVING SYSTEMS, INC.

FILED Oct 20, 2005 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

12130 WASHINGOTN STREET 1419 NW 65TH AVE

BLDG 71 PLANTATION, FL 33313 US

PEMBROKE PINE, FL 33025

New Mailing Address: Current Mailing Address:

12130 WASHINGOTN STREET 1419 NW 65TH AVE

BLDG 71 PLANTATION, FL 33313 FL PEMBROKE PINE, FL 33025

FEI Number: 33-1027832 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SASSON, SHAHAF SASSON, SHAHAF 12130 WASHINGOTN STREET 1419 NW 65TH AVE

PLANTATION, FL 33313 US BLDG 71

PEMBROKE PINE, FL 330725 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: SHAHAF SASSON 10/20/2005

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SASSON, SHAHAF SASSON, SHAHAF Name: Name: 12130 WASHINGOTN STREET, BLDG 71 Address: 1419 NW 65TH AVE Address:

City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: PLANTATION, FL 33313 US

Title: () Delete Title: () Change (X) Addition Name: Name: LEVIN, YARON Address: Address: 1419 NW 65TH AVE PLANTATION, FL 33313 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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: SHAHAF SASSON 10/20/2005 D