

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000001655

FILED
Oct 06, 2009
Secretary of State

Entity Name: ADVANCED TRANSPORTATION & INTERPRETATION SERVICES, INC.

Current Principal Place of Business:

123 N. KROME AVENUE
SUITE 205
HOMESTEAD, FL 33030

New Principal Place of Business:

2638 NW 97 AVENUE
DORAL, FL 33172

Current Mailing Address:

PO BOX 941056
MIAMI, FL 33194

New Mailing Address:

FEI Number: 11-3670212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, JOSE G PD
1102 S.W. 122ND AVENUE
215
MIAMI, FL 33184 US

Name and Address of New Registered Agent:

ALVAREZ, JOSE G PD
11202 NW 75 TERR
MEDLEY, FL 33178 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: JOSE G ALVAREZ

10/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALVAREZ, JOSE
Address: 1102 S.W. 122ND AVENUE # 215
City-St-Zip: MIAMI, FL 33184

Title: V () Delete
Name: ALVAREZ, JESUS H VP
Address: URB. LOS GERANIOS, QTA ANISKA
City-St-Zip: CARACAS, DF VZLA

Title: SD () Delete
Name: VIVAS, ANA
Address: 4890 NW 102 AVENUE, #204
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALVAREZ, JOSE
Address: 11202 NW 75 TERR
City-St-Zip: MEDLEY, FL 33178

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: JOSE G ALVAREZ

PD

10/06/2009

Electronic Signature of Signing Officer or Director

Date