

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000005857

FILED
Nov 23, 2005
Secretary of State

Entity Name: PINES CHILDREN TRANSPORTATION, INC.

Current Principal Place of Business:

4907 S.W. 167 AVENUE
MIRAMAR, FL 33027

New Principal Place of Business:

8567 CORAL WAY
302
MIAMI, FL 33155

Current Mailing Address:

8567 CORAL WAY
SUITE 302
MIAMI, FL 33155

New Mailing Address:

FEI Number: 06-1672476 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELASQUEZ, JUAN
8025 LAKE DRIVE
UNIT 202
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

VELASQUEZ, JUAN
10710 NW 66 ST
514
DORAL, 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: JUAN VELASQUEZ

11/23/2005

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:

Title: PD () Delete
Name: VELASQUEZ, JUAN
Address: 8025 LAKE DRIVE #202
City-St-Zip: MIAMI, FL 33166

Title: VD () Delete
Name: ORTIZ, NEFAIDY
Address: 4907 SW 167 AVENUE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VELASQUEZ, JUAN
Address: 10710 NW 66 ST. APT. 514
City-St-Zip: DORAL, FL 33178

Title: VD (X) Change () Addition
Name: ORTIZ, NEFAIDY
Address: 10710 NW 66 ST APT 514
City-St-Zip: DORAL, FL 33178

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 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: JUAN VELASQUEZ

PD

11/23/2005

Electronic Signature of Signing Officer or Director

Date