

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000075677 1. Entity Name BTI TRUCKING, INC.						FILED 04 DEC 29 AM 10: 23 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 877 SHED STREET OVIEDO, FL 32765				Mailing Address 877 SHED STREET OVIEDO, FL 32765			
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip		Country		4. FEI Number		Applied For	
SEMINOLE		32765		USA		55-0836503	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
ABBOUD, MARWAN 877 SHED STREET OVIEDO, FL 32765				Name Street Address (P.O. Box Number is Not Acceptable) 877 Shed Street City Oviedo State FL Zip Code 32765			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Maryann E. Bonotto</u> / MARYANN E. BONOTTO 12-27-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	P	<input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	ABBOUD, MARWAN			NAME	President		
STREET ADDRESS	877 SHED STREET			STREET ADDRESS	Bonotto, Thomas M		
CITY-ST-ZIP	OVIEDO, FL 32765			CITY-ST-ZIP	877 Shed Street		
TITLE	S	<input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	ABBOUD, DENISE			NAME	Secretary		
STREET ADDRESS	877 SHED STREET			STREET ADDRESS	Bonotto, Maryann E		
CITY-ST-ZIP	OVIEDO, FL 32765			CITY-ST-ZIP	877 Shed Street		
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
12. 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <u>Maryann E. Bonotto</u> / MARYANN E. BONOTTO				12-27-04 407-359-9962 <small>Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			