

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**

08 MAR 24 AM 9:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P03000098770

1. Entity Name  
EDGE MOVING TRANSFER AND STORAGE INC.



Principal Place of Business  
3448 S ST LUCIE DR  
CASSELBERRY, FL 32707

Mailing Address  
5703 RED BUG LAKE ROAD, STE 324  
WINTER SPRINGS, FL 32708



2. Principal Place of Business - No P.O. Box #  
1451 WILLOW BRANCH DR  
Suite, Apt. #, etc.

3. Mailing Address  
1451 WILLOW BRANCH DR  
Suite, Apt. #, etc.

03242008 REIN-P CR2E098 (1/07)

City & State  
ORLANDO FL  
Zip  
32828  
Country  
USA

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ORLANDO FL  
Zip  
32828  
Country  
USA

4. FEI Number  
90-0108733  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEWIS, EDWARD  
3448 S ST LUCIE DR  
CASSELBERRY, FL 32707

7. Name and Address of New Registered Agent

Name  
EDWARD LEWIS  
Street Address (P.O. Box Number is Not Acceptable)  
1451 WILLOW BRANCH DR  
City  
ORLANDO FL Zip Code  
32828

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 *Edward Lewis*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-24-08

**FILE NOW!!! FEE IS \$300.00**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
LEWIS, EDWARD  
1451 WILLOW BRANCH DRIVE  
ORLANDO, FL 32828 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VP  
WILLIAMS, HYLTON  
14639 SALINGER ROAD  
ORLANDO, FL 32828 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition  
800121501598  
03/28/08--01002--001 \*\*300.00

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
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CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
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CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or a 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: *Edward Lewis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

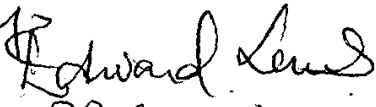
3-24-08 407-695-1433  
Date Daytime Phone #

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EDWARD G. LEWIS  
FOR EDGE MOVING TRANSFER  
AND STORAGE INC  
1451 WILLOW BRANCH DR.  
ORLANDO, FL 32828

TO THE DEPT OF CORPORATIONS,

I RECENTLY FOUND OUT MY CORPORATION WAS DISOLVED  
DUE TO A RETURN CHECK, HOWEVER I DID NOT  
RECEIVE THE NOTICE SENT BY THE DEPT INFORMING  
ME OF THAT FACT. I AM HEREBY ASKING THE  
DEPT TO WAIVE THE FEE AND ACCEPT PAYMENT  
DUE, PLUS CURRENT FILING FEE.


RESPECTFULLY  
  
PRESIDENT.

3/24/2008

EDWARD G. LEWIS  
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AND STORAGE INC  
1451 WILLOW BRANCH DR.  
ORLANDO, FL 32828

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3/24/2008