



2005 FOR PROFIT CORPORATION REINSTATEMENT

192

DOCUMENT # P03000131486						05 DEC -9 PM 2:59	
1. Entity Name HENRY'S TRANSFER INC.				05			
Principal Place of Business 7240 NW 72 AVE. MIAMI, FL 33122		Mailing Address 7240 NW 72 AVE. MIAMI, FL 33122		SECRET STATE 			
2. Principal Place of Business		3. Mailing Address		12062005 REIN-P CR2E098 (6/04)			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 05-0591205			
City & State		City & State		Applied For Not Applicable			
Zip	Country	Zip	Country	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			
MARTINEZ, ENRIQUE 7240 NW 72 AVE. MIAMI, FL 33122				Name <u>Enrique Martinez III</u> Street Address (P.O. Box Number is Not Acceptable) <u>same as before</u> City <u>FL</u> Zip Code			
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>Enrique Martinez III</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <u>12/07/05</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After January 1, 2006, 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 NAME STREET ADDRESS CITY-ST-ZIP	D <u>MARTINEZ, ENRIQUE</u> <input checked="" type="checkbox"/> Delete 7240 NW 33 ST. MIAMI, FL 33122			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Enrique Martinez III</u> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <u>same as before</u> <u>ADARSC</u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700062449027 12/28/05--01058--017 **150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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>Enrique Martinez III</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE <u>12/07/05</u> Date Daytime Phone #			

HENRY'S TRANSFER INC.
7240 NW 72 Avenue
Miami, Florida 33122

2092

Tuesday, December 06, 2005

Florida Dept. of State
Division of Corporation
P.O. Box 6327
Tallahassee, Florida 32314

Re: 2005 Profit Corporation Report

To Whom It May Concern:

Please note that in 2004 we added Enrique Martinez III and requested that Enrique Martinez be deleted. (See attached copy of the 2004 report). Our accountant obtained for us, the current reinstatement form, but it does not show this change. Please correct this oversight in your records.

We are also requesting a waiver of the late fee for the annual report, as we never received the 2005 notice and were unaware that anything was amiss until our bank brought it to our attention. We have enclosed the \$150.00 fee required along with the required reinstatement report.

Thank you for your assistance with this matter. If you have any questions or need any other information please do not hesitate to contact us.

Sincerely,



Enrique Martinez III
Director