

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000026592

FILED
Oct 28, 2009
Secretary of State

Entity Name: A.D. TRUCKING ENTERPRISES INC.

Current Principal Place of Business:

16274 HIBISCUS RD
BROOKSVILLE, FL 34601

New Principal Place of Business:

3309 W KATHLEEN ST
TAMPA, FL 33607 US

Current Mailing Address:

16274 HIBISCUS RD
BROOKSVILLE, FL 34601

New Mailing Address:

3309 W KATHLEEN ST
TAMPA, FL 33607 US

FEI Number: 20-0696106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, ARIEL
16274 HIBISCUS RD.
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

DIAZ, ARIEL
3309 W KATHLEEN ST
TAMPA, FL 33607 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: ARIEL DIAZ

10/28/2009

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: DP () Delete
Name: DIAZ, ARIEL
Address: 16274 HIBISCUS RD
City-St-Zip: BROOKSVILLE, FL 34601

Title: DV () Delete
Name: MEDRANO, NORMA L
Address: 16274 HIBISCUS RD.
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DIAZ, ARIEL
Address: 3309 W KATHLEEN ST
City-St-Zip: TAMPA, FL 33607 US

Title: DV (X) Change () Addition
Name: MEDRANO, NORMA L
Address: 3309 W KATHLEEN ST
City-St-Zip: TAMPA, FL 33607 US

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: ARIEL DIAZ

DP

10/28/2009

Electronic Signature of Signing Officer or Director

Date