

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000050398

FILED  
Oct 18, 2006  
Secretary of State

Entity Name: TRANSFREIGHT CORPORATION

## Current Principal Place of Business:

4631 NW 31ST AVE  
SUITE 177  
FORT LAUDERDALE, FL 33309

## New Principal Place of Business:

## Current Mailing Address:

4631 NW 31ST AVE  
SUITE 177  
FORT LAUDERDALE, FL 33309

## New Mailing Address:

FEI Number: 75-3149502

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REID, DAVE A  
3371 NW 47 AVE  
COCONUT CREEK, FL 33063 US

## Name and Address of New Registered Agent:

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: DAVE REID

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: D ( ) Delete  
Name: REID, DAVE A  
Address: 3371 NW 47TH AVE  
City-St-Zip: COCONUT CREEK, FL 33063

Title: P ( ) Delete  
Name: REID, DENISE L  
Address: 3371 NW 47TH AVE  
City-St-Zip: COCONUT CREEK, FL 33063

Title: V ( ) Delete  
Name: COMOCK, JACQUELINE  
Address: 6390 NW 28 STREET  
City-St-Zip: SUNRISE, FL 33313

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVE REID

Electronic Signature of Signing Officer or Director

P

10/18/2006

Date