

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000124338

FILED
Oct 19, 2005
Secretary of State

Entity Name: INTERSTATE PALLET CORPORATION

Current Principal Place of Business:

5293 MICHIGAN AVE.
SANFORD, FL 32771

New Principal Place of Business:

399 ICE CREAM ROAD
LEESBURG, FL 32749

Current Mailing Address:

5293 MICHIGAN AVE.
SANFORD, FL 32771

New Mailing Address:

P O BOX 730
ALTOONA, FL 32702 US

FEI Number: 74-3129517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORO, HECTOR G
5293 MICHIGAN AVE.
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

SLOCOMB, LORRAINE M
527 UMATILLA BLVD
UMATILLA, FL 32784 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: LORRAINE M SLOCOMB

10/19/2005

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: P () Delete
Name: TORO, HECTOR G
Address: 5293 MICHIGAN AVE.
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: HECTOR G TORO

P

10/19/2005

Electronic Signature of Signing Officer or Director

Date