2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000130204

Entity Name: TARGET FREIGHT INC

FILED Sep 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9919 W OKEECHOBEE RD 2925 WEST 80 STREET APT 533D APT 205

HIALEAH GARDENS, FL 33016 HIALEAH, FL 33018

Current Mailing Address: New Mailing Address:

9919 W OKEECHOBEE RD 2925 WEST 80 STREET APT 533D APT 205

HIALEAH GARDENS, FL 33016 HIALEAH, FL 33018

FEI Number: 20-1631302 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ESTOPINAN, MANUEL
9919 W OKEECHOBEE RD
APT 533D
HIALEAH GARDENS, FL 33016 US
ESTOPINAN, MANUEL
2925 WEST 80 STREET
APT 205
HIALEAH, FL 33018 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: MANUEL ESTOPINAN 09/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: ESTOPINAN, MANUEL Name: ESTOPINAN, MANUEL Address: 9919 WEST OKEECHOBEE RD., APT 533D Address: 2925 WEST 80 STREET., APT 205

City-St-Zip: HIALEAH GARDENS, FL 33016 City-St-Zip: HIALEAH, FL 33018

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Title: PD () Delete Title: PD (X) Change () Addition

Name: PANEQUE, ALIET M Name: PANEQUE, ALIET M

Address: 9919 WEST OKEECHOBEE RD., APT 533D Address: 2925 WEST 80 STREET., APT 205

City-St-Zip: HIALEAH GARDENS, FL 33016 City-St-Zip: HIALEAH, FL 33018

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: MANUEL ESTOPINAN S 09/28/2005