2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000145047

Entity Name: FLORIDA XPRESS, INC.

FILED Sep 20, 2005 Secretary of State

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

12225 SW 114 TER 11800 NW 24TH STREET

MIAMI, FL 33186 11800 NW 24TH STREET, FL 33323

Current Mailing Address: New Mailing Address:

12225 SW 114 TER 11800 NW 24TH STREET MIAMI, FL 33186 PLANTATION, FL 33323

FEI Number: 37-1498406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

AUSTIN, BENJAMIN B AUSTIN, BENJAMIN B 12225 SW 114 TER 11800 NW 24TH STREET MIAMI, FL 33186 US PLANTATION, FL 33323

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: BENJAMIN B. AUSTIN 09/20/2005

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition AUSTIN, BENJAMIN B AUSTIN, BENJAMIN B Name: Name:

12225 SW 114 TER 11800 NW 24TH STREET Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: PLANTATION, FL 33323

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

GABRIEL, NANCY Name: GABRIEL, NANCY P 12225 SW 114 TER 11800 NW 24TH STREET Address: Address: MIAMI, FL 33186 PLANTATION, FL 33323 City-St-Zip: City-St-Zip:

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

BROSSARD, RALPH Name: NANCY, GABRIEL P Name: 12225 SW 114 TER 11800 NW 24TH STREET Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: PLANTATION, FL 33323

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: NANCY P.GABRIEL VT 09/20/2005