2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 18, 2006
Secretary of State

DOCUMENT# P05000114044

Entity Name: GIO'S TRUCKING SERVICES, CORP

Current Principal Place of Business:

7580 NE 4TH COURT
SUITE F
MIAMI, FL 33138

New Principal Place of Business:

7570 NW 14 ST
SUITE 201
MIAMI, FL 33126

Current Mailing Address:

PO BOX 160418
MIAMI, FL 33116

New Mailing Address:

FEI Number: 20-3309481 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ESCOBAR, IHOSVANY
14464 SW 115TH TERRACE
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

ESCOBAR, IHOSVANY
5677 SW 142 AVENUE
MIAMI, FL 33183 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: IHOSVANY ESCOBAR 09/18/2006
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: ESCOBAR, IHOSVANY
Address: 14464 SW 115TH TERRACE
City-St-Zip: MIAMI, FL 33186

Title: VP ( ) Delete
Name: ESCOBAR, ADOLFO
Address: 5677 SW 142 AVE
City-St-Zip: MIAMI, FL 33183

Title: S ( ) Delete
Name: ESCOBAR, PATRICIA
Address: 14464 SW 115TH TERRACE
City-St-Zip: MIAMI, FL 33186

Title: T (X) Delete
Name: ESCOBAR, CARMEN
Address: 5677 SW 142 AVE
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ESCOBAR, IHOSVANY
Address: 5677 SW 142 AVENUE
City-St-Zip: MIAMI, FL 33183

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

Title: S (X) Change ( ) Addition
Name: ESCOBAR, CARMEN
Address: 5677 SW 142 AVENUE
City-St-Zip: MIAMI, FL 33183

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: IHOSVANY ESCOBAR PRES 09/18/2006
Electronic Signature of Signing Officer or Director Date