

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000010244

Entity Name: APEX TRUCKING, INC

FILED  
Jan 04, 2008  
Secretary of State

## Current Principal Place of Business:

1950 SHERIDEN ST.  
HOLLYWOOD, FL 33020

## New Principal Place of Business:

560 NW 165 ST RD  
300  
MIAMI, FL 33167

## Current Mailing Address:

1950 SHERIDEN ST.  
HOLLYWOOD, FL 33020

## New Mailing Address:

560 NW 165 ST RD  
300  
MIAMI, FL 33167

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

## Name and Address of Current Registered Agent:

SMITH, SHARLENE  
10040 SHERIDAN ST  
SUITE 107  
PEMBROKE PINES, FL 33024 US

## Name and Address of New Registered Agent:

CORNILEUS, CARTER  
560 NW 165 ST RD  
300  
MIAMI, FL 33167 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: CARTER CORNILEUS

01/04/2008

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: CORNILEUS, CARTER JR  
Address: 10040 SHERIDAN ST  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP (X) Delete  
Name: ROBERTS, CALVIN D  
Address: 731 NE 141 ST  
City-St-Zip: MIAMI, FL 33161

Title: CEO (X) Delete  
Name: CARRENARD, OCKTAVE  
Address: 731 NE 141 ST  
City-St-Zip: MIAMI, FL 33161

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CORNILEUS, CARTER JR  
Address: 560 NW 165 ST RD  
City-St-Zip: 300, FL 33167

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 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: CORNILEUS CARTER

P

01/04/2008

Electronic Signature of Signing Officer or Director

Date