

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000028024

Entity Name: GASCA TRUCKING, INC.

FILED  
Jul 30, 2008  
Secretary of State

## Current Principal Place of Business:

15351 SW 303RD STREET  
HOMESTEAD, FL 33034 US

## New Principal Place of Business:

15351 SW 303RD STREET  
HOMESTEAD, FL 33034 US

## Current Mailing Address:

## New Mailing Address:

15351 SW 303RD STREET  
HOMESTEAD, FL 33034 US

FEI Number: 20-4372227

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GASCA, VERONICA  
15351 SW 303RD STREET  
HOMESTEAD, FL 33034 US

## Name and Address of New Registered Agent:

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: VERONICA GASCA

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 D ( ) Delete  
Name: GASCA, ROSENDO  
Address: 19322 SW 193 PATH  
City-St-Zip: FLORIDA CITY, FL 33034 US

Title: VP D ( ) Delete  
Name: GASCA, ANDRES  
Address: 15351 SW 303 ST  
City-St-Zip: HOMESTEAD, FL 33034 US

Title: S D (X) Delete  
Name: GASCA, ARTEMIO  
Address: 120 COMANCHE RD  
City-St-Zip: LYONS, GA 30436 US

Title: T D ( ) Delete  
Name: GASCA, VERONICA  
Address: 15351 SW 303RD STREET  
City-St-Zip: HOMESTEAD, FL 33034 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: GASCA, ANDRES  
Address: 15351 SW 303 ST  
City-St-Zip: HOMESTEAD, FL

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: VERONICA GASCA

Electronic Signature of Signing Officer or Director

TD

07/30/2008

Date