P06000041210

(Requestor's Name)
(Address)
(Address)
(Hadroso)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Stanios Line)
(2)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 ming Officer.

Office Use Only



600074673056

05/19/06--01018--016 **35.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: BALKAN EXPRESS TRU (Name of Corpora	ICKING
DOCUMENT NUMBER: P06000041210	
The enclosed Statement of Change of Registered Office/Ager	nt and fee are submitted for filing.
Please return all correspondence concerning this matter to the	following:
Milan BUKVA (Name of Contact P	erson)
Balkan express truct	king inc.
8619 Fort Shea ave (Address)	
Orlando Fl 32822 (City/State and Zip	Code)
For further information concerning this matter, please call:	
Hilan Bukva at ((Name of Contact Person)	407) 306 9965 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of	of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.050		,	
statement of change is submitted for a corporation organing in order to change its registered office or registered.			
1. The name of the corporation: BALKAN EX 2. The principal office address: 8619 FOR+	PRESS TRUCK	CING INC.	
2. The principal office address: 8619 FORT	sned ave.	Uriando fi, 328	<u> </u>
3. The mailing address (if different):			
		5	
4. Date of incorporation/qualification: 5./3.06	Document number: _	P06000041210	
5. The name and street address of the current registered at Florida Department of State:	gent and registered office o	on file with the	
LUKA BUKVA			
8619 Fort Shea Ave			
8619 Fort Shea Ave Orlando Fl 32822		20 TAI	
6. The name and street address of the new registered agen	rt (if changed) and /or regis	FIL 2006 MAY 19 SECRETARY ALLAHASSE	
(if changed):		FIL Stered office	
MILAN BUKVA	10 10 10 10 10 10 10 10 10 10 10 10 10 1	ILED 9 AM 8 RY GF ST SEE. FLG	
8619 Fort Shea Au	C	AM 8:	
MILAN BUKVA 8619 FORT Shea Au (P.O. Book NOT acceptable) Orlando, Fl. 32825	2	28	
The street address of its registered office and the street as changed will be identical.	address of the business of	ffice of its registered agent,	
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been no	l by its board of directors tified in writing of the ch	or by an officer so ange.	
(Signification of the of director)	MILAN BUKVI	A President	
I hereby accept the appointment as registered agent an I further agree to comply with the provisions of all stati of my duties, and I am familiar with and accept the obli document is being filed merely to reflect a change in th corporation has been notified in writing of this change.			
Mylinh	5.13.06		
(Signature of Registered Agent)	(Date	c)	
If signing on behalf of an entity:			
MILAN BUKVA (Typed or Printed Name)			

* * * FILING FEE: \$35.00 * * *