

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000061017

Entity Name: VB TRANSPORT, INC.

FILED
Sep 30, 2009
Secretary of State

Current Principal Place of Business:

8804 HUNTINGTON POINTE DRIVE
SARASOTA, FL 34238

New Principal Place of Business:

2826 ANTHONY DR
TAMPA, FL 33619

Current Mailing Address:

8804 HUNTINGTON POINTE DRIVE
SARASOTA, FL 34238

New Mailing Address:

2826 ANTHONY DR
TAMPA, FL 33619

FEI Number: 20-4783486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARRIENTOS, AUDREY
8804 HUNTINGTON POINTE DRIVE
SARASOTA, FL 34238 US

Name and Address of New Registered Agent:

GONZALEZ, MAGALY
2826 ANTHONY DR
TAMPA, FL 33619 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: MAGALY GONZALEZ

09/30/2009

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: BARRIENTOS, AUDREY
Address: 8804 HUNTINGTON POINTE DRIVE
City-St-Zip: SARASOTA, FL 34238

Title: VP () Delete
Name: BARRIENTOS, AUDREY
Address: 8804 HUNTINGTON POINTE DRIVE
City-St-Zip: SARASOTA, FL 34238

Title: S/T () Delete
Name: FONSECA, LUIS A SR
Address: 8804 HUNTINGTON POINTE DRIVE
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, MAGALY
Address: 2826 ANTHONY DR
City-St-Zip: TAMPA, FL 33619

Title: VP (X) Change () Addition
Name: GONZALEZ, MAGALY
Address: 2826 ANTHONY DR
City-St-Zip: TAMPA, FL 33619

Title: S/T (X) Change () Addition
Name: FONSECA, LUIS A SR
Address: 2826 ANTHONY DR
City-St-Zip: TAMPA, FL 33619

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: LUIS FONSECA

S/T

09/30/2009

Electronic Signature of Signing Officer or Director

Date