

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P06000065001

1. Entity Name
BALDERAS TRUCKING INC.



FILED

2007 SEP 26 AM 12:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
416 DANIELS POINT DR
WINTER GARDEN, FL 32787

Mailing Address
416 DANIELS POINT DR
WINTER GARDEN, FL 32787



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09222007 REIN-P CR2E098 (1/07)

City & State

City & State

4. FEL Number
65-1287294

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BALDERAS, FERNANDO
416 DANIELS POINT DR
WINTER GARDEN, FL 32787

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2008, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME BALDERAS, FERNANDO
STREET ADDRESS 416 DANIELS POINT DR
CITY-ST-ZIP WINTER GARDEN, FL 32787

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Fernando Balderas*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-22-07 (407) 509-8012
Date Daytime Phone #

9/27