2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000101490

City-St-Zip:

Entity Name: M. MILA TRANSPORT INC

FILED Oct 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 901 SALLY AVE NORTH LEHIGH ACRES, FL 33971 **Current Mailing Address: New Mailing Address:** 901 SALLY AVE NORTH LEHIGH ACRES, FL 33971 FEI Number: 20-5327406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILA, MARTA 901 SALLY AVE NORTH LEHIGH ACRES, FL 33971 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: MARTA MILA 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MILA, MARTA Name: Name: 901 SALLY AVE NORTH Address: Address: City-St-Zip: LEHIGH ACRES, FL 33971 City-St-Zip: () Delete Title: SP Title: () Change () Addition MILA, ANTONIO Name: Name: 901 SALLY AVE NORTH Address: Address: LEHIGH ACRES, FL 33971

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: MARTA MILA DP 10/30/2008