

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P06000128704

1. Entity Name
THE GREEN TEAM XPRESS, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

37 DEC 31 AM 11:48

Principal Place of Business
12125 FRUITWOOD DRIVE
RIVERVIEW, FL 33569 US

Mailing Address
12125 FRUITWOOD DRIVE
RIVERVIEW, FL 33569 US

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

City & State
Zip Country



10062007 REIN-P CR2E098 (1/07)

4. FEI Number
20-5679554

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GREEN, JEFF
12125 FRUITWOOD DRIVE
RIVERVIEW, FL 33569

7. Name and Address of New Registered Agent

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 *Kathleen A. Green* - *Jeffrey A. Green* 12-30-07
Signature, typed or printed name of registered agent and title if applicable. (Typed or printed name of registered agent and title if applicable) (Typed or printed name of registered agent and title if applicable) 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

TITLE P
NAME GREEN, KATHLEEN
STREET ADDRESS 12125 FRUITWOOD DRIVE
CITY-ST-ZIP RIVERVIEW, FL 33569 ☐ Delete

TITLE VP
NAME GREEN, JEFF
STREET ADDRESS 12125 FRUITWOOD DRIVE
CITY-ST-ZIP RIVERVIEW, FL 33569 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
800113551148
01/02/08--01034--008 **158.75

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: *Kathleen A. Green* - *Jeffrey A. Green* 12-30-07 813-741-1650
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #