

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P06000130609

1. Entity Name  
FL USA EXPRESS INC.



FILED

2007 SEP 26 PM 3:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
5106 TOWN N COUNTRY BLVD  
TAMPA, FL 33615

Mailing Address  
5106 TOWN N COUNTRY BLVD  
TAMPA, FL 33615

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

09242007

REIN-P

CR2E098 (1/07)

4. FEI Number

20-5724738

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

LABRADOR, FANNY  
5106 TOWN N COUNTRY BLVD  
TAMPA, FL 33615

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

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

TITLE DPT ☐ Delete  
NAME LABRADOR, FELIX  
STREET ADDRESS 5106 TOWN N COUNTRY BLVD  
CITY - ST - ZIP TAMPA, FL 33615

TITLE DVS ☐ Delete  
NAME LABRADOR, FANNY  
STREET ADDRESS 5106 TOWN N COUNTRY BLVD  
CITY - ST - ZIP TAMPA, FL 33615

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME 300109959643  
STREET ADDRESS 09/26/07--01034--019  
CITY - ST - ZIP \*\*150.00

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

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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:

*Fanny Labrador*  
FANNY LABRADOR

9/24/07 (813)900-4983

Date

Daytime Phone #