
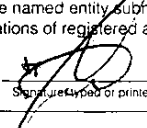
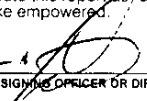


2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P06000138649 1. Entity Name YURAL DELIVERY SERVICE INC.						FILED 07 OCT 24 PM 1:03 DEPARTMENT OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 19911 EAGLE NEST ROAD MIAMI, FL 33157				Mailing Address 19911 EAGLE NEST ROAD MIAMI, FL 33157			
2. Principal Place of Business - No P.O. Box # 957 E 27 ST		3. Mailing Address 957 E 27 ST		 REINSTATEMENT 10227007 REIN-R CR2ED98 (1/07) 07			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 					
City & State HALEAH FL		City & State HALEAH- FL		4. FEI Number 20-5823638		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip 33013		Country USA		Zip 33013		Country USA	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required							
6. Name and Address of Current Registered Agent GUTIERREZ, YURALDY 19911 EAGLE NEST ROAD MIAMI, FL 33157				7. Name and Address of New Registered Agent Name GUTIERREZ YURALDY Street Address (P.O. Box Number is Not Acceptable) 957 E 27 ST City HALEAH- FL Zip Code 33013			
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 				DATE 10/24/07			
(NOTE: Registered Agent signature required when reinstating)							
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 PD <input type="checkbox"/> Delete NAME GUTIERREZ, YURALDY STREET ADDRESS 19911 EAGLE NEST ROAD CITY-ST-ZIP MIAMI, FL 33157				TITLE PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME GUTIERREZ YURALDY STREET ADDRESS 957 E 27 ST. CITY-ST-ZIP HALEAH- FL. 33013			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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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: YURALDY GUTIERREZ 				DATE 10/24/07 DAYTIME PHONE # 786-777-9064			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR							