

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000145653

Entity Name: LUQUE EXPRESS CORP

FILED
Oct 09, 2007
Secretary of State

Current Principal Place of Business:

4732 NW 192 TERR
MIAMI GARDENS, FL 33055

New Principal Place of Business:

4505 NW 165 STREET
MIAMI GARDENS, FL 33054 US

Current Mailing Address:

P.O. BOX 170936
HIALEAH, FL 33017

New Mailing Address:

4505 NW 165 STREET
MIAMI GARDENS, FL 33054 US

FEI Number: 20-5918691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACHORRO, CLAUDIA
4732 NW 192 TERR
MIAMI GARDENS, FL 33055 US

Name and Address of New Registered Agent:

MACHORRO, CLAUDIA
4505 NW 165 STREET
MIAMI GARDENS, FL 33054 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: CLAUDIA MACHORRO

10/09/2007

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:

Title: P () Delete
Name: MACHORRO, CLAUDIA
Address: 4732 NW 192 TERR
City-St-Zip: MIAMI GARDENS, FL 33055

Title: VP () Delete
Name: LUQUE, LUIS A
Address: 4732 NW 192 TERR
City-St-Zip: MIAMI GARDENS, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MACHORRO, CLAUDIA
Address: 4505 NW 165 STREET
City-St-Zip: MIAMI GARDENS, FL 33054 US

Title: VP (X) Change () Addition
Name: LUQUE, LUIS A
Address: 4505 NW 165 STREET
City-St-Zip: MIAMI GARDENS, FL 33054

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: CLAUDIA MACHORRO

P

10/09/2007

Electronic Signature of Signing Officer or Director

Date