2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 29, 2008
Secretary of State

DOCUMENT# P07000011617

Entity Name: YAROVI TRUCKING & LOGISTICS INC.

Current Principal Place of Business:

629 E PALM DR
APT-105
HOMESTEAD, 33034

New Principal Place of Business:

629 E PALM DR
APT-105
HOMESTEAD, FL 33034

Current Mailing Address:

629 E PALM DR
APT-105
HOMESTEAD, 33034

New Mailing Address:

629 E PALM DR
APT-105
HOMESTEAD, FL 33034

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRUJILLO, PEDRO
629 E PALM DR
APT-105
HOMESTEAD, FL 33034 US

Name and Address of New Registered Agent:

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: PEDRO TRUJILLO

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: TRUJILLO, PEDRO
Address: 629 E PALM DR APT-105
City-St-Zip: HOMESTEAD, FL 33034

Title: VP ( ) Delete
Name: LOPEZ, YAROVI
Address: 629 E PALM DR APT-105
City-St-Zip: HOMESTEAD, FL 33034

Title: T/S ( ) Delete
Name: MARTINEZ, VILMA
Address: 629 E PALM DR APT-105
City-St-Zip: HOMESTEAD, FL 33034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: PEDRO TRUJILLO PRES 10/29/2008

Electronic Signature of Signing Officer or Director Date