P07000065337

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	e #)
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(Document Number)		
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SECRETARY OF STATE
ALLAHASSEE, FIORINA

R.A. Charge

3. Coulliette MAY 1 5 200

COVER LETTER

Division of Corporations	
SUBJECT: ENS TRANSPORT CORP	
(Name of Corpo	oration)
DOCUMENT NUMBER: P07000065337	
The enclosed Statement of Change of Registered Office/Ag	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to t	·
EDDY GONZALEZ	
(Name of Contact	t Person)
ENS TRANSPORT CORP	
(Firm/Compa	any)
505 ZACHARY DR	
(Address)	
APOPKA FL 32712	
(City/State and Zi	ip Code)
For further information concerning this matter, please call:	
EDDY GONZALEZ	(Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departmen	t of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

- STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of che	ange is submitted for a corporation	07.0302, 607.1308, 07.617.1308, Ptortal Statutes, this organized under the laws of the State of FLORIDA registered agent, or both, in the State of Florida.		
1. The name of	the corporation: ENS TRANSI	PORT CORP		
2. The principal	office address: 505 ZACHAR	Y DR		
	A FL 32712			
3. The mailing a	address (if different): SAME			
4. Date of incorp	poration/qualification: 06/01/200	07 Document number: P07000065337		
5. The name and Florida Depar	d street address of the current registe runent of State:	ered agent and registered office on file with the		
	CORPORATION SERVI	CES COMPANY		
	1201 HAYS STREET			
	TALLAHASSEE FL 32301			
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered office	08 MA	
	EDDY GONZALEZ	A SS	Y 12	
	505 ZACHARY DR		A	
	(F.O. Box NOT seed	optable)	= 1	
	APOPKA FL 32712			
The street address changed will	ess of its registered office and the s be identical.	street address of the business office of its registered ag	jent,	
Such change was authorized by th	as authorized by resolution duly ad the beard, or the corporation has bee	copted by its board of directors or by an officer so en notified in writing of the change.		
Cert	My/	EDDY GONZALEZ, PRES.		
	ure or six nineces or (inscror)	(Printed or typed numb and title)	_	
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered ages to comply with the provisions of all id I am familiar with and accept the ng filed merely to reflect a change is been notified in writing of this cha	nt and agree to act in this capacity, I statutes relative to the proper and complete perform e obligation of my position as registered agent. Or, if in the registered office address, I hereby confirm that ange.	ance this the	
By:	lega	05/02/2008		
, -	mature of Registered Agent)	(Dafe)	_	
If signing on bel	half of an entity:			
EDDY GON				
(1	yped or Printed Name)			
	* * * FILING	G FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)