

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000083503

Entity Name: HLA TRUCKING INC.

**FILED**  
**Jan 31, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

4191 SW 135TH AVE  
DAVIE, FL 33330

**New Principal Place of Business:**

4191 SW 135TH AVE  
DAVIE, FL 33330 UN

**Current Mailing Address:**

4191 SW 135TH AVE  
DAVIE, FL 33330

**New Mailing Address:**

4191 SW 135TH AVE  
DAVIE, FL 33330 UN

FEI Number: 30-0585532

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ASHLEY, HOMAR  
4191 SW 135TH AVE  
DAVIE, FL 33330 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: HOMAR ASHLEY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D/P  
Name: ASHLEY, HOMAR  
Address: 4191 SW 135TH AVE  
City-St-Zip: DAVIE, FL 33330

Title: VP/T  
Name: ASHLEY, HOMAR  
Address: 4191 SW 135TH AVE  
City-St-Zip: DAVIE, FL 33330

Title: D/S  
Name: ASHLEY, DOREEN  
Address: 4191 SW 135TH AVE  
City-St-Zip: DAVIE, FL 33330

I hereby 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 all other like empowered.

SIGNATURE: W LUNA

AGEN

01/31/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date