

2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED

11 APR -4 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

10-11

DOCUMENT # P09000092363 1. Entity Name BIG B FAMILY TRUCKING, INC.					
Principal Place of Business 1950 N.W. 192 TER. MIAMI GARDENS, FL 33056 US			Mailing Address 1950 N.W. 192 TER. MIAMI GARDENS, FL 33056 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAKS BLVD. SUITE A-100 TAMPA, FL 33612			7. Name and Address of New Registered Agent Name BRIAN F. WILLIAMS Street Address (P.O. Box Number is Not Acceptable) 1950 N.W. 192 TER. MIAMI GARDENS, FL City FL Zip Code 33056		
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 <u><i>Brian F. Williams</i></u> Signature typed or printed name of registered agent and fee collector (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (If 11)		
TITLE NAME STREET ADDRESS CITY ST ZIP	PRES WILLIAMS, ROXANNE A 1950 N.W. 192 TER. MIAMI GARDENS, FL 33056	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	TREA WILLIAMS, DANYAEL R 1950 N.W. 192 TER. MIAMI GARDENS, FL 33056	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition 400200376324 04/04/11--01035--009 **900.00
TITLE NAME STREET ADDRESS CITY ST ZIP	SECR WILLIAMS, ISAIAH J 1950 N.W. 192 TER. MIAMI GARDENS, FL 33056	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	DIRE WILLIAMS, BRIAN F 1950 N.W. 192 TER. MIAMI GARDENS, FL 33056	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition <i>\$24/4</i>
TITLE NAME STREET ADDRESS CITY ST ZIP	 	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	 	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
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: <u><i>Brian F. Williams</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					