

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000065248

Entity Name: SOUTHERN MOVES, INC.

FILED
Nov 02, 2006
Secretary of State

Current Principal Place of Business:

9401 N.W. 109TH STREET
BAY 4
MEDLEY, FL 331781285 US

New Principal Place of Business:

Current Mailing Address:

9401 N.W. 109TH STREET
BAY 4
MEDLEY, FL 331781285 US

New Mailing Address:

FEI Number: 65-0605414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TTABARES, JOSE F
9401 N W 109TH STREET, BAY 4
MEDLEY, FL 33178 US

Name and Address of New Registered Agent:

TABARES, JOSE F PST
9401 N W 109TH STREET, BAY 4
MEDLEY, FL 33178 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: JOSE F TABARES

11/02/2006

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: DPST () Delete
Name: TABARES, JOSE F
Address: 9405 N W 109TH STREET, BAY 4
City-St-Zip: MEDLEY, FL 33178

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: TABARES, JOSE F PST
Address: 9405 N W 109TH STREET, BAY 4
City-St-Zip: MEDLEY, FL 33178

Title: VPST () Change (X) Addition
Name: TABARES, MARIA G VPST
Address: 9405 NW 109TH STREET, BAY 4
City-St-Zip: MEDLEY, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSE F TABARES

PST

11/02/2006

Electronic Signature of Signing Officer or Director

Date