2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000054339

Entity Name: PINE ISLAND TAXI AND LIMO, INC

FILED Dec 08, 2004 Secretary of State

yu.		NVD 17007 NVD ENVIC, II	110.		
Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
2922 YORI ST JAMES	KROAD SCITY, FL 3398	56			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 6' ST JAMES	74 8 CITY, FL 3398	56 US			
FEI Number:	: 65-0681042	FEI Number Applied For	() FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Ag	ent: Name and Address	Name and Address of New Registered Agent:	
MARSHAL 2922 YORI ST JAMES		56 US			
	named entity s of Florida.	ubmits this statement f	or the purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electroni	ic Signature of Registe	red Agent	Date	
		3(2)(b), F.S., the corporation (on did not receive the prior notice. ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PVST () MARSHALL, CAI 2922 YORK RD. ST. JAMES CITY	,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPT () MARSHALL, CAI 2922 YORK RD. ST. JAMES CITY		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CAROL MARSHALL PRES 12/08/2004