2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000081513

Entity Name: EXPRESS TRADING AND INVESTMENTS, INC.

FILED Jun 12, 2006 Secretary of State

9209 KNIGHT BRANCH STREET 4132 N.50TH ST **TAMPA, FL 33637** TAMPA, FL 33619

Current Mailing Address: New Mailing Address:

9209 KNIGHT BRANCH STREET P.O. BOX 290474 TAMPA, FL 33637 TAMPA, FL 33687

FEI Number: 59-3518257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

REFAIE, NICK REFAIE, NICK 9209 KNIGHT BRANCH STREET 7814 BÚLLARA DR. TAMPA, FL 33637 US TAMPA, FL 33637

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: NICK REFAIE 06/12/2006

> 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title:

REFAIE, NICK REFAIE, NICK Name: Name: 9209 KNIGHT BRANCH STREET 7814 BULLARA DR. Address: Address:

TAMPA, FL 33637 City-St-Zip: TAMPA, FL 33637 City-St-Zip:

Title: Title: (X) Change () Addition () Delete REFAIE, SAM Name: REFAIE, SAM Name: P O BOX 292413 4132 N.50TH ST. Address: Address: TAMPA, FL 33687 TAMPA, FL 33619 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition

ALREFAIE, ANTHONY ALREFAIE, ANTHONY Name: Name: PO BOX 292413 4132 N.50TH ST. Address: Address: City-St-Zip: TAMPA, FL 33687 City-St-Zip: TAMPA, FL 33619

Title: () Delete Title: () Change (X) Addition

REFAIE, AHMAD Name: Name: Address: Address: 4132 N.50TH ST. City-St-Zip: City-St-Zip: TAMPA, AL 33619

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: NICK REFAIE PD 06/12/2006