2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000103613

Entity Name: EMPIRE TRANSPORTATION SERVICES, INC.

FILED Nov 03, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

7800 WEST SANDLAKE RD SUITE 214 2133 PIMLICO STREET ORLANDO, FL 32819 ORLANDO, FL 32822 US

Current Mailing Address: New Mailing Address:

7800 WEST SANDLAKE RD SUITE 214 997 CALANDA AV

ORLANDO, FL 32819 ORLANDO, FL 32807 US

FEI Number: 59-3551041 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

OSPINA, MARIA CATHERIN
2133 PIMLICO STREET
5422 CARRIER DRIVE
ORLANDO, FL 32822 US
305
ORLANDO, FL 32819 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: JAMES BYRD JR. 11/03/2004

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:

PSTD

Title:

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

 Name:
 OSPINA, MARIACATHERINE
 Name:
 ROMERO, CRISTINA

 Address:
 2133 PIMLICO STREET
 Address:
 2133 PIMLICO STREET

 City-St-Zip:
 ORLANDO, FL 32822
 City-St-Zip:
 ORLANDO, FL 32822 US

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

 Name:
 Name:
 RODRIGUEZ, EDWIN C

 Address:
 Address:
 997 CALANDA AVE

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32807 US

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: CRISTINA ROMERO PSTD 11/03/2004