## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P99000024118

FILED Sep 20, 2006 Secretary of State

Entity Name: ACCESS TRANS & LIMOUSINE SERVICE INC.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
15012 SPINNAKER COVE LANE WINTER GARDEN, FL 334787					
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
15012 SPINNAKER COVE LANE WINTER GARDEN, FL 34787					
FEI Number:	59-3569337	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
TAZI, ELIA 15012 SPII WINTER G	S KARIM NNAKER CO' JARDEN, FL	VE LANE 34787 US	TAZI, MOHAMED PRE 15012 SPINNAKER CO WINTER GARDEN, FL	VE LANE	
The above in the State		submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: MOHAMED TAZI				09/20/2006	
Electronic Signature of Registered Agent			ent	Date	
		93(2)(b), F.S., the corporation did no ng Trust Fund Contribution (  ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TAZI, MOHAM 15012 SPINNA	) Delete ED AKER COVE LANE DEN, FL 34787	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	TAZI, ADAM A 15012 SPINNA	() Delete HMED A AKER COVE LANE DEN, FL 34787	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	IMANE, SEBTI 15012 SPINNA	() Delete AKER COVE LANE DEN, FL 34787	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name:	VP () TAZI, ALIAS A	K) Delete HMED	Title: ( Name:	) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MOHAMED TAZI Ρ 09/20/2006

15012 SPINNAKER COVE LANE

WINTER GARDEN, FL 34787

Address:

City-St-Zip: