


2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P99000051041		
1. Entity Name TRANSPORTATION INFORMATION SERVICES, INC.		

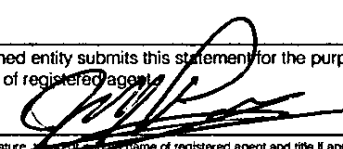
Principal Place of Business P O BOX 121251 CLERMONT, FL 34712 US	Mailing Address P O BOX 121251 CLERMONT, FL 34712 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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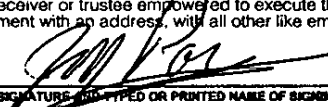
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent POHLAR, JEFFRY 11729 LAKE MINNEOLA SHORES CLERMONT, FL 34711	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: 	DATE:

FILE NOW!!! FEE IS \$750.00 After January 1, 2007, Fee will be \$900.00																									
10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	DATE: DEC - 5 2006

FILED
06 DEC -5 PM 4: 09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
REINSTATEMENT
10272006 REIN-R SR2E099 (11/05)