2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 294470

Entity Name: CARGO GASOLINE CO

FILED May 18, 2005 Secretary of State

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

205 HOOVER ST. TAMPA, FL 33609

Current Mailing Address: New Mailing Address:

205 HOOVER ST TAMPA, FL 33609

FEI Number: 59-1097660 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:

HUGHEY, MIKE WILSON, J STYLES 205 SOUTH HOOVER 205 SOUTH HOOVER TAMPA, FL 33609 TAMPA, FL 33609

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: J STYLES WILSON 05/18/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

CARTER, SHIRLEY Name: HUGHEY, MIKE, Name: 205 S HOOVER ST 205 S HOOVER ST Address: Address: City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 33609

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

Name: JAMES D. FARMER. Name: FARMER, JAMES D 205 S. HOOVER STREET, #400 205 S. HOOVER STREET, #400 Address: Address:

TAMPA, FL TAMPA, FL

City-St-Zip: City-St-Zip:

VPD Title: (X) Change () Addition Title: () Delete VSD CARTER, SHIRLEY, THATCHER, CAROLYN Name: Name: 205 S HOOVER ST 205 S HOOVER ST #400 Address: Address:

City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 33609

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

THATCHER, CAROLYN Name: Address: 205 S HOOVER ST Address: City-St-Zip: TAMPA, FL City-St-Zip:

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: SHIRLEY CARTER **PRES** 05/18/2005