2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K45516

1. Entity Name

LANDSTAR DEVELOPMENT CORPORATION



US

Principal Place of Business

550 BILTMORE WAY

1110

CORAL GABLES, FL 33134

Mailing Address

550 BILTMORE WAY

1110

CORAL GABLES, FL 33134



FILED Apr 21, 2004 8:00 am Secretary of State

04-21-2004 90029 031 ***150.00

94058020



02172004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0094460

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHECHTER, ROSA EGDSTEHY 550 BILTMORE WAY SUITE 1120 CORAL GABLES, FL 33134

Eckstein

DO NOT WRITE IN THIS SPACE

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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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. **PDC** TITLE NAME STERN, RODOLFO STREET ADDRESS 550 BILTMORE WAY #1110 CITY - ST- ZIP CORAL GABLES, FL VSD TITLE NAME HORWITZ, ROBERTO (EX) STREET ADDRESS 550 BILTMORE WAY #1110 CITY-ST-ZIP CORAL GABLES, FL VTD TITLE SERVIANSKY, DAVID (EX) NAME 550 BILTMORE WAY #1110 STREET ADDRESS CORAL GABLES, FL CITY-ST-782 TITLE STERN, EDUARDO (EX) NAME 550 BILTMORE WAY #1110 STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL TITLE BERNARD, ECKSTEIN NAME STREET ADDRESS 550 BILTMORE WAY #1110 CORAL GABLES, FL CITY - ST - ZIP TITLE MORRISEY, WILLIAM NAME 120 FAIRWAY WOODS BLVD. STREET ADDRESS ORLANDO, FL 32824 CITY-ST-ZIP

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12: I hereby certify that the information supplied with this filing does not qualify 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 signature strate 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 to 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 life exposures.

SIGNATURE: __

SIGNATURE AND TYPED OR PRINTED NA

Rodolfo Stern

4-15-04

(305) 461-3190