


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

DOCUMENT # K45516 1. Entity Name LANDSTAR DEVELOPMENT CORPORATION	
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Principal Place of Business 550 BILTMORE WAY 1110 CORAL GABLES, FL 33134 US	Mailing Address 550 BILTMORE WAY 1110 CORAL GABLES, FL 33134 US
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TALLAHASSEE, FLORIDA



03152005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0094460	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**ROSA ECKSTEIN SCHECHTER, ESQ.
 550 BILTMORE WAY
 SUITE 1110
 CORAL GABLES, FL 33134**

DO NOT WRITE IN THIS SPACE

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) DATE

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

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

900054004389
 05/06/05--01047--024 **150.00

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900054004389
 05/06/05--01047--025 **8.75

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 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 information.

SIGNATURE:  **Rodolfo Stern** **4/15/05** **(305) 461-2440**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #