

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000019735

FILED
Apr 29, 2005
Secretary of State

Entity Name: PACESETTERS DELIVERY, INC.

Current Principal Place of Business:

1345 PINE AVE
ORLANDO, FL 32824

New Principal Place of Business:

Current Mailing Address:

2277 LAKEVILLE RD
APOPKA, FL 32703

New Mailing Address:

FEI Number: 59-3626843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALI, SHAMEER
2277 LAKEVILLE RD
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALI, SHAMEER
Address: 2277 LAKEVILLE RD
City-St-Zip: APOPKA, FL 32703

Title: VP () Delete
Name: AKBAR, ALLAN ALI
Address: 2277 LAKEVILLE RD
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: SHAMEER ALI

PD

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date