

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063083

FILED
Jul 08, 2004
Secretary of State

Entity Name: MONTEVERDI TRANSPORT SERVICES, INC.

Current Principal Place of Business:

5739 NW 101 COURT
MIAMI, FL 33178

New Principal Place of Business:

10329 185 ST SOUTH
BOCA RATON, FL 33498

Current Mailing Address:

5739 NW 101 COURT
MIAMI, FL 33178

New Mailing Address:

10329 185 ST SOUTH
BOCA RATON, FL 33498

FEI Number: 81-0555148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTEVERDE, SASKIA
5739 NW 101 COURT
MIAMI, FL 33178

Name and Address of New Registered Agent:

MONTEVERDE, HECTOR
10329 185 ST SOUTH
BOCA RATON, FL 33498

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: HECTOR MONTEVERDE

07/08/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MONTEVERDE, SASKIA
Address: 5739 NW 101 COURT
City-St-Zip: MIAMI, FL 33178

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MONTEVERDE, HECTOR G MR
Address: 10329 185 ST SOUTH
City-St-Zip: BOCA RATON, FL 33498

Title: VP () Change (X) Addition
Name: MONTEVERDE, SASKIA L MRS
Address: 10329 185 ST SOUTH
City-St-Zip: BOCA RATON, FL 33498

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: HECTOR MONTEVERDE

MR

07/08/2004

Electronic Signature of Signing Officer or Director

Date