

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000103198

FILED
Apr 20, 2005
Secretary of State

Entity Name: 3J'S TRANSPORTATION, INC.

Current Principal Place of Business:

14900 S.W. 93RD STREET
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

14900 S.W. 93RD STREET
MIAMI, FL 33196

New Mailing Address:

PO BOX 830073
MIAMI, FL 33283

FEI Number: 13-4265464

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MONTALVO, MATILDE
14900 S.W. 93RD STREET
MIAMI, FL 33196 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: DP () Delete
Name: MONTALVO, MATILDE
Address: 14900 S.W. 93RD STREET
City-St-Zip: MIAMI, FL 33196

Title: VPTS () Delete
Name: MONTALVO, YOANI
Address: 14900 S.W. 93RD STREET
City-St-Zip: MIAMI, FL 33196

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: MONTALVO, YOANI
Address: P O BOX 830073
City-St-Zip: MIAMI, FL 33283

Title: VP (X) Change () Addition
Name: MONTALVO, MATILDE
Address: 14900 S.W. 93RD STREET
City-St-Zip: MIAMI, FL 33196

Title: S () Change (X) Addition
Name: PINA, JESSICA J
Address: 14900 SW 93 ST
City-St-Zip: MIAMI, FL 33196

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: YOANI MONTALVO

DPT

04/20/2005

Electronic Signature of Signing Officer or Director

_____ Date