

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000118011

FILED
Jan 15, 2004
Secretary of State

Entity Name: MEDEIROS TRANSPORT, INC.

Current Principal Place of Business:

211 WOOTEN RD
LUTZ, FL 33548

New Principal Place of Business:

Current Mailing Address:

211 WOOTEN RD
LUTZ, FL 33548

New Mailing Address:

FEI Number: 51-0486834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDEIROS, MANEUL L III
211 WOOTEN RD
LUTZ, FL 33548

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: PT () Delete
Name: MEDEIROS, MANUEL L III
Address: 211 WOOTEN RD
City-St-Zip: LUTZ, FL 33548

Title: V () Delete
Name: MEDEIROS, WILLIAM A
Address: 211 WOOTEN RD
City-St-Zip: LUTZ, FL 33548

Title: S () Delete
Name: MEDEIROS, DOUGLAS
Address: 211 WOOTEN RD
City-St-Zip: LUTZ, FL 33548

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: MEDEIROS, DOUGLAS
Address: 211 WOOTEN RD
City-St-Zip: LUTZ, FL 33548

Title: S () Change (X) Addition
Name: MEDEIROS, ROSE Y
Address: 211 WOOTEN RD
City-St-Zip: LUTZ, FL 33558

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: MANUAL L MEDEIROS III

PT

01/15/2004

Electronic Signature of Signing Officer or Director

Date