

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 14, 2007 8:00 am
Secretary of State

04-24-2007 90015 001 ***150.00

66014768



1st MOORE CR2E034 (10/06)

DOCUMENT # P06000044507 1. Entity Name HIGH PERFORMANCE TRANSPORT, CORP.																																																																																																																													
Principal Place of Business 2531 COOLIDGE ST. HOLLYWOOD FL 33020			Mailing Address 2531 COOLIDGE ST. HOLLYWOOD FL 33020																																																																																																																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																																																																																																											
City & State		City & State		4. FEI Number 56-2573269																																																																																																																									
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																																									
6. Name and Address of Current Registered Agent QUINTERO, AMADO 2531 COOLIDGE ST. HOLLYWOOD FL 33020				7. Name and Address of New Registered Agent -- Name Street Address (P.O. Box Number is Not Acceptable) City																																																																																																																									
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.				FL Zip Code																																																																																																																									
SIGNATURE _____ Signature, typed or printed name of registered agent and title is acceptable. (NOTE: Registered Agent signature required when re-registering)																																																																																																																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																																										
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 65%; padding: 2px;">NAME</td> <td style="width: 20%; padding: 2px;">☐ Delete</td> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 65%; padding: 2px;">NAME</td> <td style="width: 20%; padding: 2px;">☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">247 CLEVELAND ST.</td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">HOLLYWOOD FL 33020</td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">V</td> <td>☐ Delete</td> <td style="padding: 2px;">TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">AREAS, JAZMINA</td> <td></td> <td style="padding: 2px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">2531 COOLIDGE ST.</td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">HOLLYWOOD FL 33020</td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td></td> <td>☐ Delete</td> <td style="padding: 2px;">TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td></td> <td></td> <td style="padding: 2px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td></td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td></td> <td>☐ Delete</td> <td style="padding: 2px;">TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td></td> <td></td> <td style="padding: 2px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td></td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td></td> <td>☐ Delete</td> <td style="padding: 2px;">TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td></td> <td></td> <td style="padding: 2px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td></td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	247 CLEVELAND ST.		STREET ADDRESS			CITY-ST-ZIP	HOLLYWOOD FL 33020		CITY-ST-ZIP			TITLE	V	☐ Delete	TITLE		☐ Change ☐ Addition	NAME	AREAS, JAZMINA		NAME			STREET ADDRESS	2531 COOLIDGE ST.		STREET ADDRESS			CITY-ST-ZIP	HOLLYWOOD FL 33020		CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																																																																																																										
TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition																																																																																																																								
STREET ADDRESS	247 CLEVELAND ST.		STREET ADDRESS																																																																																																																										
CITY-ST-ZIP	HOLLYWOOD FL 33020		CITY-ST-ZIP																																																																																																																										
TITLE	V	☐ Delete	TITLE		☐ Change ☐ Addition																																																																																																																								
NAME	AREAS, JAZMINA		NAME																																																																																																																										
STREET ADDRESS	2531 COOLIDGE ST.		STREET ADDRESS																																																																																																																										
CITY-ST-ZIP	HOLLYWOOD FL 33020		CITY-ST-ZIP																																																																																																																										
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition																																																																																																																								
NAME			NAME																																																																																																																										
STREET ADDRESS			STREET ADDRESS																																																																																																																										
CITY-ST-ZIP			CITY-ST-ZIP																																																																																																																										
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition																																																																																																																								
NAME			NAME																																																																																																																										
STREET ADDRESS			STREET ADDRESS																																																																																																																										
CITY-ST-ZIP			CITY-ST-ZIP																																																																																																																										
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition																																																																																																																								
NAME			NAME																																																																																																																										
STREET ADDRESS			STREET ADDRESS																																																																																																																										
CITY-ST-ZIP			CITY-ST-ZIP																																																																																																																										
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 empowered.																																																																																																																													
SIGNATURE: SIGNATURE AND TITLE OF PERSON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																													