

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000000617

**FILED  
Apr 06, 2008  
Secretary of State**

**Entity Name:** CRUZ DELIVERY SERVICE, INC.

**Current Principal Place of Business:**

764 NW 29TH ST  
MIAMI, FL 33127 US

**New Principal Place of Business:**

**Current Mailing Address:**

9404 S.W. 8TH TERR.  
MIAMI, FL 33174 US

**New Mailing Address:**

**FEI Number:** 65-0726861      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CRUZ, PATRICIA  
9404 S.W. 8TH TERR.  
MIAMI, FL 33174 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: D ( ) Delete  
Name: CRUZ, ALFREDO  
Address: 9404 S.W. 8TH TERR.  
City-St-Zip: MIAMI, FL 33174

Title: D ( ) Delete  
Name: CRUZ, PATRICIA  
Address: 9404 S.W. 8TH TERR.  
City-St-Zip: MIAMI, FL 33174

Title: D ( ) Delete  
Name: OJEDA, ROLANDO  
Address: 12261 SW 28 ST  
City-St-Zip: MIAMI, FL 33175

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 exemption stated in Chapter 119, 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: PATRICIA CRUZ

SECR

04/06/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date