


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90819 027 ***150.00

DOCUMENT # F05000005549	
1. Entity Name SEIBAL CARGO CORP.	

Principal Place of Business 5930 N.W. 99 AVE. UNIT #11 DORAL, FL 33178	Mailing Address 5930 N.W. 99 AVE. UNIT #11 DORAL, FL 33178
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2. Principal Place of Business - No P.O. Box # 10775 NW 21 Street	3. Mailing Address 10775 NW 21 Street
Suite, Apt. #, etc. Unit # 120	Suite, Apt. #, etc. Unit # 120
City & State Miami FL	City & State Miami FL
Zip 33172	Country

40092140

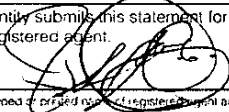


04172007 Chg-P CR2E034 (12/06)

4. FEI Number 05-0621580	Applied For <input type="checkbox"/> Not Applicable
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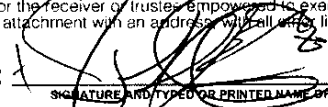
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HEER, HECTOR 5930 N.W. 99 AVE. UNIT #11 DORAL, FL 33178	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 10775 NW 21 Street # 120 City Miami FL Zip Code 33172
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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. SIGNATURE  Hector Heer Pres. 4/30/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC HEER, HECTOR 85-24 123RD STREET KEY GARDENS, NY 11415 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10775 NW 21 Street #120 Miami, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPVC GARCIA, JORGE 85-24 123RD STREET KEY GARDENS, NY 11415 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10775 NW 21 Street #120 Miami, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RAMIREZ, VANESSA F 14944 S.W. 23RD WAY MIAMI, FL 33185 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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:  Hector Heer Pres 4/30/07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date 4/30/07 <small>Daytime Phone #</small>