2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F53418

FILED May 03, 2004 Secretary of State

Entity Na	me: AUTO MA	ARINE TRAN	ISPORT, INC.				
Current Principal Place of Business:			s:	New Principal Pla	New Principal Place of Business:		
5532 PAR FORT LAI	K RD JDERDALE, FL	_ 33312 l	JS				
Current M	lailing Addres	s:		New Mailing Addr	ess:		
P. O. BOX FT LAUDE	(21785 ERDALE, FL 3(3335 US					
FEI Number	: 65-0164661	FEI Number	Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			istered Agent:	Name and Addres	Name and Address of New Registered Agent:		
NOLAN, J 5532 PAR FT LAUDE		3312 US					
	e named entity s e of Florida.	submits this	statement for the	ourpose of changing its registe	ered office or registered agent, or both,		
SIGNATU	RE:						
	Electron	ic Signature	of Registered Ag	ent	Date		
Election Ca	mpaign Financing	g Trust Fund C	Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () NOLAN, JAMES 5532 PARK RD FT LAUDERDAI			Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	T () NOLAN, JAMES	Delete		Title: Name:	() Change () Addition		
Address: City-St-Zip:	5532 PARK RD FT LAUDERDAI	·		Address: City-St-Zip:			

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: JAMES T NOLAN PRES 05/03/2004