

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J46112

FILED
May 01, 2003
Secretary of State

Entity Name: C.D.I. TRANSPORTATION, INC.

Current Principal Place of Business:

1324 COCO PLUM RD.
P O BOX 3387, MARATHON SHORES, FL 33052
MARATHON SHORES, FL 33050

New Principal Place of Business:

19 SOMBRERO BOULEVARD
MARATHON, FL 33050

Current Mailing Address:

1324 COCO PLUM RD.
P O BOX 3387, MARATHON SHORES, FL 33052
MARATHON SHORES, FL 33050

New Mailing Address:

19 SOMBRERO BOULEVARD
MARATHON, FL 33050

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE MARAS, RENEE A ESQ
2655 LE JEUNE RD PH-1D
CORAL GABLES, FL 33134 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: DS () Delete
Name: DEMARAS, SUE
Address: 1260 52ND ST. GULF
City-St-Zip: MARATHON, FL

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DEMARAS, SUE D
Address: 1324 COCO PLUM ROAD
City-St-Zip: MARATHON, FL 33050 US

Title: D () Change (X) Addition
Name: DEMARAS, PATRICIA D
Address: 84 MAIN STREET
City-St-Zip: WATERTOWN, CT 06795 US

Title: D () Change (X) Addition
Name: DEMARAS, RENEE D
Address: 2655 LE JEUNE ROAD, PH 1-D
City-St-Zip: CORAL GABLES, FL 33134 US

Title: S () Change (X) Addition
Name: DEMARAS, SUE S
Address: 1324 COCO PLUM ROAD
City-St-Zip: MARATHON, FL 33050 US

Title: D () Change (X) Addition
Name: DEMARAS, PATRICIA D
Address: 84 MAIN STREET
City-St-Zip: WATERTOWN, CT 06795 US

Title: D () Change (X) Addition
Name: FAULK, OLIVER B D
Address: PO BOX 34303
City-St-Zip: CHARLOTTE, NC 28234 US

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: RENEE DEMARAS

D

05/01/2003

Electronic Signature of Signing Officer or Director

Date