2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2007 8:00 am
Secretary of State
04-02-2007 90099 011 ***150.00

DOCUMENT # K25342

1. Entity Name
SPEEDY ENTERPRISES TRANSPORT, INC.

Principal Place of Business	Mailing Address
26300 SW 132 AVE. HOMESTEAD, FL 33032	26300 SW 132 AVE. HOMESTEAD, FL 33032

03232007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
23650 SW 132 Ave	23650 SW 132 ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Homestead FL	City & State: Homestead FL
Zip: 33032 Country: US	Zip: 33032 Country: US

4. FEI Number: 65-0054905 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LORENZO, BERTO 23600 SW 132 AVE PRINCETON, FL 33032	Name: Lorenzo, Berto Street Address (P.O. Box Number is Not Acceptable): 23650 SW 132 Ave City: Princeton FL Zip Code: 33032

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: _____ 3.22.07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00: After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LORENZO, BERTO 23600 SW 132 AVE PRINCETON, FL 33032	☐ Delete	PD Lorenzo, Berto 23650 SW 132 ave Princeton FL 33032	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CALVO, LEANOR 23600 SW 132 AVE PRINCETON, FL 33032	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ 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 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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #