

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L36726

FILED
May 28, 2004
Secretary of State

Entity Name: AIRPORT SHUTTLE, INC.

Current Principal Place of Business:

8485 S FEDERAL HWY
PT. ST. LUCIE, FL 34952 US

New Principal Place of Business:

6648 S FEDERAL HWY
PT. ST. LUCIE, FL 34952 US

Current Mailing Address:

8485 S FEDERAL HWY
PT. ST. LUCIE, FL 34952 US

New Mailing Address:

6648 S FEDERAL HWY
PT. ST. LUCIE, FL 34952 US

FEI Number: 59-2981255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PICANO, JOHN
2780 MORNINGSIDE BLVD
PORT ST LUCIE, FL 34952 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PICANO, JOHN,
Address: 8485 S. FEDERAL HWY
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PICANO, JOHN,
Address: 6648 S. FEDERAL HWY
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: JOHN PICANO

PRES

05/28/2004

Electronic Signature of Signing Officer or Director

_____ Date