

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90029 020 ****70.00

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1. Entity Name
HEAVENLY ANGELS TRANSPORTATIONS, INC.



Principal Place of Business
704 NW 12TH AVE., APT. 17
ATTN: LESSIE LINDSAY
FT. LAUDERDALE, FL 33311

Mailing Address
704 NW 12TH AVE., APT. 17
ATTN: LESSIE LINDSAY
FT. LAUDERDALE, FL 33311

50007255



2. Principal Place of Business

704 N. W 12th AVE #17

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03202006 Chg-NP CR2E037 (11/05)

City & State

Fort. Lauderdale

City & State

4. FEI Number

13-4295055

Applied For

Not Applicable

Zip

33311

Country

Broward

Zip

Country

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

LINDSAY, LESSIE FAYE
3391 NW 46TH AVE.
LAUDERDALE LAKES, FL 33319

Name
LESSIE FAYE LINDSAY

Street Address (P.O. Box Number is Not Acceptable)
704 N. W 12th AVE APT 17#

City
H. Lauderdale

FL

Zip Code
33311

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution.

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\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LINDSAY, LESSIE FAYE
STREET ADDRESS 3391 NW 46TH AVE.
CITY-ST-ZIP LAUDERDALE LAKES, FL 33319

TITLE TD
NAME MERZIUS, ELIE
STREET ADDRESS 3391 NW 46TH AVE.
CITY-ST-ZIP LAUDERDALE LAKES, FL 33319

TITLE SD
NAME KING, MABERIALA
STREET ADDRESS 819 NW 3 ST., #8
CITY-ST-ZIP FT. LAUDERDALE, FL 33311

TITLE VD
NAME HOLLOMAN, SAMUEL
STREET ADDRESS 1117 NW 2 ST., #1
CITY-ST-ZIP FT. LAUDERDALE, FL 33311

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME COOKE PHILLIP
STREET ADDRESS 2327 N 25th AVE
CITY-ST-ZIP holly wood fla 33020

TITLE
NAME Martin Shirley
STREET ADDRESS 7953 SW 6th St
CITY-ST-ZIP north lauderdate fla. 33068

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 617, 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: Lessie Faye Lindsay
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/2006

Date

754-245-6659

Daytime Phone #