

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000068638

**FILED**  
**Apr 30, 2004**  
**Secretary of State**

**Entity Name:** CONTINENTAL REFRIGERATED TRANSPORT, INC.

**Current Principal Place of Business:**

6530 CALYPSO DR.  
ORLANDO, FL 32809 US

**New Principal Place of Business:**

14844 LAGUNA BEACH CIR  
ORLANDO, FL 32824 US

**Current Mailing Address:**

PO BOX 590025  
ORLANDO, FL 32859

**New Mailing Address:**

**FEI Number:** 59-3657200      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FERNANDEZ, ANTONIO P  
6530 CALYPSO DRIVE  
ORLANDO, FL 32809

**Name and Address of New Registered Agent:**

FERNANDEZ, ANTONIO P  
14844 LAGUNA BEACH CIR  
ORLANDO, FL 32824

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: ANTONIO P. FERNANDEZ      04/30/2004  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FERNANDEZ, ANTONIO P  
Address: 6530 CALYPSO DR.  
City-St-Zip: ORLANDO, FL 32809

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: FERNANDEZ, ANTONIO P  
Address: 14844 LAGUNA BEACH CIR  
City-St-Zip: ORLANDO, FL 32824

Title: VPS ( ) Change (X) Addition  
Name: TORRES, HERMINIA M  
Address: 14844 LAGUNA BEACH CIR  
City-St-Zip: ORLANDO, FL 32824

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: ANTONIO P. FERNANDEZ      PT      04/30/2004  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date