2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000074481

Entity Name

LANDSTAR SOUTH DADE VENTURES, INC.

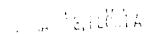


Principal Place of Business

550 BILTMORE WAY #1110 CORAL GABLES, FL 33134 Mailing Address

550 BILTMORE WAY #1110 CORAL GABLES, FL 33134

FILED Apr 22, 2005 8:00 am Secretary of State





DO NOT WRITE IN THIS SPACE

	•	
4. FEI Number		Applied For
65-1145479		Not Applicable

5. Certificate of Status Desired

03152005

\$8.75 Additional Fee Required

CR2E034 (10/03)

6. Name and Address of Current Registered Agent

ROSA ECKSTEIN SCHECHTER, ESQ. 550 BILTMORE WAY SUITE 1110 CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

No Cha-P

					
	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE
	E NOWIII FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE	Р		ŀ		
NAME	STERN, RODOLFO				•
STREET ADDRESS	550 BILTMORE WAY 1110				
CITY+ST-ZIP	CORAL GABLES, FL 33134				
TITLE	VP	·			
NAME	STERN, EDUARDO			_8	300053933038
STREET ADDRESS	550 BILTMORE WAY 1110			05,	/06/0501007020 **150.00
CITY-ST-ZIP	CORAL GABLES, FL 33134				
TITLE	VP	****			
NAME	SERVIANSKY, DAVID				
STREET ADDRESS	550 BILTMORE WAY 1110				
CITY-ST-ZIP	CORAL GABLES, FL 33134			DO	NOT WRITE
TITLE	VP				T. 110 OD 1 OF
NAME	HORWITZ, ROBERTO			IN	THIS SPACE
STREET ADDRESS	550 BILTMORE WAY 1110				
CITY-ST-ZIP	CORAL GABLES, FL 33134	`			
TITLE	D	<u>. </u>			
NAME	ECKSTEIN, BERNARD				
STREET ADDRESS	550 BILTMORE WAY 1110				
CITY-ST-ZIP	CORAL GABLES, FL 33134				j
	COTTLE GABLES, FE 33134				
TITLE					†
NAME					
STREET ADDRESS					

12. I hereby certify that the information supplied with this filling does not qualify 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 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 poort as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 is changed, or on an attachment with a statement with a

SIGNATURE:

Rodolfo Stern

41505

(305) 461-2440

Daytime Phone #