


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2005 08:00 A**  
**Secretary of State**

**DOCUMENT # P0000075832**  
 1. Entity Name  
**COMMERCIAL TRANSPORT NETWORK, INC.**



Principal Place of Business 6146 9TH AVE CIR NE BRADENTON, FL 34212 US	Mailing Address 6146 9TH AVE CIR NE BRADENTON, FL 34212 US
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01242005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 36-3745514	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$0.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**RIDDELL, JEFFERSON F**  
**3400 S TAMiami TR**  
**SARASOTA, FL 34239**

**DO NOT WRITE IN THIS SPACE**

7. 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: \_\_\_\_\_ (NOTE: Registered Agent signature required when withdrawing) DATE: \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	8. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000330648 04/25/05-80166-023 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT TOMASINO, CAROL 6146 9TH AVE CIRCLE NE BRADENTON, FL 34212
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS TOMASINO, ALLAN 6146 9TH AVE CIRCLE NE BRADENTON, FL 34212
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), 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:** Carl Tomasino **Date:** 4/18/05 **Daytime Phone #:** 941-750-8990