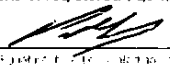
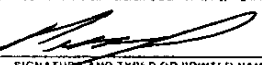


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90357 021 ***150.00

DOCUMENT # P00000095792 1. Entity Name P & P EXECUTIVE TRANSPORTER, INC.																																					
Principal Place of Business 4859 SW 152ND COURT B MIAMI, FL 33185			Mailing Address 4859 SW 152ND COURT B MIAMI, FL 33185																																		
2. Principal Place of Business State Apt # etc			3. Mailing Address State Apt # etc																																		
City & State			City & State																																		
Zip		Country		4. FEI Number 65-1047823																																	
5. Certificate of Status Desired ☐				Accepted For Not Accepted																																	
6. Name and Address of Current Registered Agent PAULHEIM, PAUL 14819 SW 45TH LANE MIAMI, FL 33185																																					
7. Name and Address of New Registered Agent Name SAHE Street Address (P.O. Box Number's Not Acceptable) 4859 SW 152 CT # B City MIAMI State FL Zip Code 33185																																					
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  PAUL PAULHEIM Date 4/20/05																																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																																		
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY ST ZIP </td> <td style="width:50%; padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> D PAULHEIM, PAUL 4859 SW 152 CT., #B MIAMI, FL 33185 </td> <td style="padding: 2px;"></td> </tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Delete</td></tr> </table>			TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	D PAULHEIM, PAUL 4859 SW 152 CT., #B MIAMI, FL 33185			☐ Delete		☐ Delete		☐ Delete		☐ Delete		☐ Delete		☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY ST ZIP </td> <td style="width:50%; padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;"> </td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> </table>			TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f) 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 I 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; changed, or on an attachment with an address with a other, be empowered																																					
SIGNATURE:  PAUL PAULHEIM Date 4/20/05 Phone (305) 551-3023 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																					

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