

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000108755

FILED
Apr 26, 2005
Secretary of State

Entity Name: OLESEN LOGISTICAL MANAGEMENT GROUP, INC.

Current Principal Place of Business:

4625 E. BAY DRIVE
STE 223
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

4625 E. BAY DRIVE
STE 223
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 59-3683018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLESEN, EILIF L
7325 NORWICH LANE
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: OLESEN, EILIF L
Address: 7325 NORWICH LANE
City-St-Zip: CLEARWATER, FL 33764

Title: SD (X) Delete
Name: OLESEN, MARTIN L
Address: 11620 MARK BLVD APT 207
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: OLESEN, DONALD L
Address: 8 DONNA DRIVE
City-St-Zip: UPPER BROOKVILLE, NY 11771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change () Addition
Name: OLESEN, EILIF L
Address: 7325 NORWICH LANE
City-St-Zip: CLEARWATER, FL 33764

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EILIF L. OLESEN

PDST

04/26/2005

Electronic Signature of Signing Officer or Director

Date