2005 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT Mar 31, 2005 08:00 AM **DOCUMENT # P01000042280 Secretary of State** 1. Entity Name CARDENAS EXPRESS INC. Principal Place of Business _____ Mailing Address 4130 BEAR LAKES COURT 4130 BEAR LAKES COURT 302 302 WEST PALM BEACH, FL 33409 WEST PALM BEACH, FL 33409 CR2E034 (10/03) 01062005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1095851 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent ZURITA, JULIA R DO NOT WRITE 4130 BEAR LAKES COURT IN THIS SPACE WEST PALM BEACH, FL 33409 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 typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE D ZURITA, JULIA R NAME STREET ADDRESS 4130 BEAR LAKES COURT # 302 WEST PALM BEACH, FL 33409 CITY-ST-ZIP TITLE U00000282317 NAME CARDENAS, ENRIQUE D 03/31/05-80038-014 150.00 STREET ADDRESS 4130 BEAR LAKES COURT #302 CITY-ST-ZIP WEST PALM BEACH, FL 33409 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 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 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:

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/2005

FILED