


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90077 029 ***150.00

DOCUMENT # P01000051984

1. Entity Name
 IVAN TRUCKING CORPORATION



Principal Place of Business Mailing Address

1510 SW 138 AVE. 1510 SW 138 AVE.
 MIAMI, FL 33184 MIAMI, FL 33184

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.


City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

PORTAL, IVAN
 1510 SW 138TH AVE.
 MIAMI, FL 33184

50035047



02122005 Chg-P CR2E034 (10/03)

4. FEI Number Applied For

65-1107997 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)

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 **11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN :**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN :	
TITLE	NAME	TITLE	NAME
	PSTD PORTAL, IVAN 11535 SW 57TH ST MIAMI, FL 33173		

12. I hereby certify that the information supplied with this filing 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: Ivan Portal **IVAN PORTAL** 4/4/05 (352) 427 2631

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #