## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P01000068973**

1. Entity Name



## FILED Apr 19, 2004 8:00 am Secretary of State 04-19-2004 90376 011 \*\*\*150.00

MAXIMEA TRANSPORTATION, INC.									
Principal Place of Business 8091 N W 13TH STREET BUILDING 14-H MARGATE, FL 33063		Mailing Address 8091 N W 13TH STREET BUILDING 14-H MARGATE, FL 33063				— - U <b>i i</b> i i i i i i i i i i i i i i i i i			
2. Principal Place of Business 5250 SW 10 H Court 5250 Suite, Apt. #, etc. 3. Mailing Address 5250 SW 10 H Court 5250 Suite, Apt. #, etc.			w 10th Ct.		94122004 C				
City & State		City & State MARGATE	FL	4	FEI Number 65-1132554			oplied For ot Applicable	
3306			Country BROWAL	עא	. Certificate of Stat		\$8.75 Add Fee Require		
6. Name and Address of Current Registered Agent  Name  MAXIMEA, ANTHONY C  8091 N W 13TH STREET  BUILDING 14-H  MARGATE, FL 33063  S. The above named entity submits this statement for the purpose of changing its registered office the obligations of registered agent.					Name and Addr X.I.W.E.A. Box Number is No S.W. 10 G.A.F.E. agent, or both, in the	An ot Acceptable)	thony -	368 I	
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
FILE NOWILL FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  C. Added to Fees									
10.	OFFICERS AND E		11.	<u> </u>			CERS AND DIRECTOR		
TITLE NAME	D MAXIMEA, ANTHONY C	☐ Delete	TITLE NAME		KIMEA		NY C Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	8091 N W 13TH STREET, BLDG. MARGATE, FL 33083	14-H	STREET ADDRESS CITY-ST-ZIP	5250 MAR	SW 10	th Co FL. 3	ukt 3068		
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	certify that the information supplied with	this filing does not outside for		Led in Section	m 119.07/300 Fin	rida Stanties T	further certify that the	information	
12. I hereby certify that the information supplied with this filling does not quality 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 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 eddress, with all other like empowered.									
SIGNATURE: SIGNATURE AND TYPED ON PRINTED NAME OF BIGUING OFFICER ON DIRECTOR DIRECT									
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