


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90189 049 ***150.00

DOCUMENT # P01000079311			
1. Entity Name YOUR TRANSPORTATION, INC.			
Principal Place of Business 4504 NW 23 AVE MIAMI, FL 33142		Mailing Address 4504 NW 23 AVE MIAMI, FL 33142	
2. Principal Place of Business 2421 East Golf DR Suite, Apt. #, etc.		3. Mailing Address 2421 East Golf DR Suite, Apt. #, etc.	
City & State MIAMI Florida		City & State MIAMI Florida	
Zip 33167	Country USA	Zip 33167	Country USA
6. Name and Address of Current Registered Agent NUBIAN TAX-CONSULTANTS 16300 NE 19 AVENUE SUITE 215 N MIAMI BEACH, FL 33162		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST KENDRICK, GREGORY 4504 NW 23 AVE MIAMI, FL 33142 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST KENDRICK, GREGORY 2421 EAST GOLF DR MIAMI, FLA 33167 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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04172006 Chg-P CR2E034 (11/05)

4. FEI Number
65-0615649 Applied For
Not Applicable

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/20/06