## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 30, 2005 08:00 AM DOCUMENT # P01000104201 **Secretary of State** 1. Entity Name REYÉS TRANSPORTATION, INC. Principal Place of Business Mailing Address 12292 W. SAMPLE RD. 12292 W. SAMPLE RD. CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065 No Chg-P CR2E034 (10/03) 04202005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1148934 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent OLSCHEWSKE, CHRISTINA L DO NOT WRITE 12292 W. SAMPLE RD. CORAL SPRINGS, FL 33065 IN THIS SPACE 3. 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 | arm, familiar with, and accept the obligations of registered agent. SIGNATURE nted name of registered agent and liftle if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution 10. OFFICERS AND DIRECTORS TITLE PTD U00000347696 REYES, WILLIAM NAME. 04/30/05-80126-020 150.00 STREET ADDRESS 12292 W. SAMPLE RD. CITY-ST-ZIP CORAL SPRINGS, FL 33065 TOTAL NAME OLSCHEWSKI, CHRISTINA L STREET ADDRESS 12292 W. SAMPLE RD. CORAL SPRINGS, FL 33065 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TOTALE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TETELE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify 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 instance in Block 10 or Block 11 if changed, or on an attachment with a partiess, with all of if the empowered. SIGNATURE: AND TYPED OR PRINTED A ME OF A GINING OFFICER OR DIRECTOR

**FILED**