## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 14, 2004 08:00 AM Secretary of State DOCUMENT # P02000016935 MAT TRANSPORT, INC. Principal Place of Business Mailing Address **5845 EDDY COURT** 5845 EDDY COURT LAKE WORTH, FL 33463 LAKE WORTH, FL 33463 04082004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 80-0037258 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MATAMOROS, URIEL DO NOT WRITE 5845 EDDY COURT LAKE WORTH, FL 33463 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title If applicable (NOTE, Registered Agent signature regulred when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees U00000112651 14/04-80031-011 10. OFFICERS AND DIRECTORS PD TITLE MATAMOROS, URIEL NAME STREET ADDRESS 5845 EDDY COURT LAKE WORTH, FL 33463 CITY-ST-ZIP TITLE NAME MATAMOROS, DANILO 5845 EDDY COURT STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33463 NAME STREET AUDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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.

04-10-01

Daytime Phone #

261 7388244

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

**FILED**