SIGNATURE:

2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State 01-13-2004 90013 029 ***150.00 DOCUMENT # P02000017563 1. Entity Name QUAD TRANSPORT, INC. Principal Place of Business Mailing Address 44001422 C/O CROTTY & BARTLETT C/O CROTTY & BARTLETT 1800 W. INTL. SPEEDWAY BLVD., STE. 201 1800 W. INTL. SPEEDWAY BLVD., STE. 201 DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 2. Principal Place of Business 3. Mailing Address 295 PRIMERA BWD. 255 PRIMERA BIVD . Suite, Apt. #, etc Suite, Apt. #, etc 01072004 CR2E034 (10/03) Chg-P Suite #100 Suite # 100 4. FEI Number Applied For City & State MRY, FL LAKE MARY 03-0389099 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired U.S.A 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ILEANA DIMARIO -CROTTY, KATHLEEN L Street Address (P.Q. Box Number is Not Acceptable) C/O CROTTY & BARTLETT 1800 W. INTL. SPEEDWAY BLVD., STE. 201 255 Primera Blvd., Ste. #100 DAYTONA BEACH, FL 32114 LAKE MARY 32746 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) the figures of the first of the ्रम्बद्धक सुद्धार <mark>सूची कर उ</mark>क्त FILE NOWILL FEE IS \$150.00 VILLE 9. Election Campaign Financing , \$5.00 May Be -Trust Fund Contribution.-Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLÉ ☐ Delete TITLE Addition KELLY, DEBORAH S KELLEY DEBORAH 1994 BRIDGEWAITER I LAKE MARY, FL 3274 NAME NAME 1954 BRIDGEWATER DR STREET ADDRESS STREET ADDRESS CITY- ST- 7IP LAKE MARY, FL 32746 CITY-ST-7IE ☐ Delete Change 🖫 TITLE TITLE □ Addition RODRIGUEZ, REMALDO 1954 BRIDGEWATER DR. RODRIGUES, REYNALDO NAME 1954 BRIDGEWATER DR STREET ADDRESS STREET ADDRESS LAKE MARY, FL 32746 LAKE MARY, FL 32746 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE **K**Change ☐ Addition DIMARIO, ILEANA DIMARIO, IRENA NAME NAME 1550 DIXON RD STREET ADDRESS 1550 DIXON RD STREET ADDRESS CITY-ST-ZIP LONGWOOD, FL 32779 CITY-ST-ZIP LONGWOOD, FL 32779 ☐ Delete TITLE **Change** ☐ Addition DIMARIO, JERRREY NAME NAME DIMARIO, JEFFREY STREET ADDRESS 1550 DIXON RD STREET ADDRESS 1550 DIXON RD CITY-ST-ZIP LONGWOOD, FL 32779 CITY-ST-ZIP LONGWOOD, FI ☐ Delete TITLE Change | T(T) F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 a property of the corporation of the

DEBORAH S. KELLEY

G OFFICER OR DIRECTOR

1/7/04

386.304.2228

Daytime Phone #

FILED Jan 13, 2004 8:00 am