

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 31, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000036711**

1. Entity Name  
**J & A CARGO EXPRESS, INC.**



Principal Place of Business  
**5020 N.W. 79TH AVENUE  
#107  
MIAMI, FL 33166**

Mailing Address  
**5020 N.W. 79TH AVENUE  
#107  
MIAMI, FL 33166**



03252005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>03-0419249</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**ARREDONDO, JORGE  
5020 N.W. 79TH AVENUE  
#107  
MIAMI, FL 33166**

**DO NOT WRITE  
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

*George E. Arredondo*

(NOTE: Registered Agent signature required when renewing)

**03-28-05**

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PTD
NAME	ARREDONDO, JORGE
STREET ADDRESS	5020 N.W. 79TH AVENUE #107
CITY-ST-ZIP	MIAMI, FL 33166

TITLE	
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1000000282559  
03/31/05-80048-010 158.75

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE:

*George E. Arredondo*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**03-28-05-305-476-0044**

Date

Daytime Phone #