


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2005 8:00 am
Secretary of State

03-08-2005 90181 027 ***158.75

DOCUMENT # P02000046053
 1. Entity Name
SENADUANA FREIGHT FORWARDERS, INC.



Principal Place of Business
 1871 SW 156 AVE.
 MIRAMAR, FL 33027

Mailing Address
 1871 SW 156 AVE.
 MIRAMAR, FL 33027

50023573

2. Principal Place of Business
7778 NW 46 St.

3. Mailing Address
7778 NW 46 St.

Suite, Apt. #, etc.



02042005 Chg-P CR2E034 (10/03)

City & State
MIAMI, FL.

City & State
MIAMI, FL.

4. Telephone No.
01-0685413 Not Applicable

Zip
33166 Country

Zip
33166 Country

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

6. Name and Address of Current Registered Agent
MANRIQUE, HECTOR F
 1871 SW 156 AVE.
 MIRAMAR, FL 33027

7. Name and Address of New Registered Agent
 Name
RAMON ISAAC LEZAMA
 Street Address (P.O. Box Number is Not Acceptable)
7778 NW 46 St.
 City
MIAMI FL Zip Code
33166

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 **2/105**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEZAMA, THOMAS A 7778 NW 46 ST. MIAMI, FL 33166 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEZAMA, JOSE G 7778 NW 46 ST. MIAMI, FL 33166 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEZAMA, RAMON ISAAC 7778 NW 46 ST. MIAMI, FL 33166 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **2/105**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #