


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 03, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000094185</b> 1. Entity Name <b>EXCEL DELIVERY &amp; TRANSPORT, INC.</b>	
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Principal Place of Business <b>16067 NW 77TH PLACE MIAMI, FL 33016</b>	Mailing Address <b>16067 NW 77TH PLACE MIAMI, FL 33016</b>
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**DO NOT WRITE IN THIS SPACE**

04302005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>56-2290419</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>TRUFFIN, MORAIMA 16067 NW 77TH PLACE MIAMI, FL 33016</b>
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**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 \_\_\_\_\_ (NOTE: Registered Agent Signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**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 NAME STREET ADDRESS CITY-ST-ZIP	P TRUFFIN, MORAIMA 16067 NW 77TH PLACE MIAMI, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OCEGUERA, REINALDO 16067 NW 77TH PLACE MIAMI, FL 33016
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05/05/05-80023-014 150.00

**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:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-28-05

Date

Daytime Phone #

MORAIMA TRUFFIN