

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098537

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: OPTIMAL TRANSPORT, INC.

**Current Principal Place of Business:**

7200 ALOMA AVE., SUITE F  
WINTER PARK, FL 32792

**New Principal Place of Business:**

**Current Mailing Address:**

7200 ALOMA AVE., SUITE F  
WINTER PARK, FL 32792

**New Mailing Address:**

FEI Number: 74-3061279

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LIEBMAN, JOHN B  
2699 LEE RD., SUITE 320  
WINTER PARK, FL 32789

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ENGELMAN, GREGORY P  
Address: 1829 KALURNA CT.  
City-St-Zip: ORLANDO, FL 32806

Title: VD ( ) Delete  
Name: FLOYD, JODIE S  
Address: 128 ROANN DR.  
City-St-Zip: OVIEDO, FL 32765

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JODI S. FLOYD

VD

04/30/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date