

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000121926

FILED
Feb 13, 2004
Secretary of State

Entity Name: SAFEWAY MOVING & TRANSPORTATION, INC.

Current Principal Place of Business:

16900 N. BAY ROAD
BLDG 3, STE. 515
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

16900 N. BAY ROAD
BLDG 3, STE. 515
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 11-3663309

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHOUDAIBERDIEV, BOURKHAN
16900 N. BAY ROAD
BLDG 3, STE. 515
SUNNY ISLES BEACH, FL 33160

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: PVPS () Delete
Name: KHOUDAIBERDIER, BOUAKHAN
Address: 16900 N BAY RD BLDG 3 STE 515
City-St-Zip: SUNNY ISLES BLVD, FL 33160

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: KHOUDAIBERDIER, BOUAKHAN
Address: 16900 N BAY RD BLDG 3 STE 515
City-St-Zip: SUNNY ISLES BLVD, FL 33160

Title: VPS () Change (X) Addition
Name: SADETZKI, MOSHE
Address: 56 LOUDON CRESENT
City-St-Zip: THORNHILL, ON L4J8N2 CA

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: B KHOUDAIBERDIEV

PRES

02/13/2004

Electronic Signature of Signing Officer or Director

Date