2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014264

Entity Name: CARGO HONDURAS, INC.

FILED Mar 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3622 GRAND PARKS DRIVE LAND O LAKES, FL 34639 **Current Mailing Address: New Mailing Address:** 13746 N NEBRASKA AVE 3622 GRAND PARKS DRIVE LAND O LAKES, FL 34639 TAMPA, FL 33613 FEI Number: 54-2095115 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: STARKMAN, FREDY STARKMAN, FREDY J 3622 GRAND PFORKS DRIVE 3622 GRAND PFORKS DRIVE LAND O LAKES, FL 34639 LAND O LAKES, FL 34639 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: FREDY STARKMAN 03/07/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition STARKMAN, FREDY Name: Name: 3622 GRAND PARKS DRIVE Address: Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: Title: Title: () Delete () Change () Addition Name: STARKMAN, ELIZABETH Name: 3622 GRAND PARKS DRIVE Address: Address: LAND O LAKES, FL 34639 City-St-Zip: City-St-Zip: Title: Title: VD () Delete () Change () Addition STARKMAN, REBECA Name: Name: 3622 GRAND PARKS DRIVE Address: Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: () Delete Title: VD Title: () Change () Addition STARKMAN, MAX Name: Name: 3622 GRAND PARKS DRIVE Address: Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: Title: VD Title: () Delete () Change () Addition STARKMAN, ELI Name: Name: 3622 GRAND PARKS DRIVE Address: Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: FREDY J STARKMAN PD 03/07/2007