

# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000014264

Entity Name: CARGO HONDURAS, INC.

FILED  
Jul 16, 2008  
Secretary of State

## Current Principal Place of Business:

3622 GRAND FORKS DRIVE  
LAND O LAKES, FL 34639

## New Principal Place of Business:

13746 N NEBRASKA AVE  
TAMPA, FL 33613

## Current Mailing Address:

13746 N NEBRASKA AVE  
TAMPA, FL 33613

## New Mailing Address:

FEI Number: 54-2095115      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STARKMAN, FREDY J  
3622 GRAND FORKS DRIVE  
LAND O LAKES, FL 34639      US

## 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

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: STARKMAN, FREDY  
Address: 3622 GRAND FORKS DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: STD ( ) Delete  
Name: STARKMAN, ELIZABETH  
Address: 3622 GRAND FORKS DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: VD ( ) Delete  
Name: STARKMAN, REBECA  
Address: 3622 GRAND FORKS DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: VD ( ) Delete  
Name: STARKMAN, MAX  
Address: 3622 GRAND FORKS DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: VD (X) Delete  
Name: STARKMAN, ELI  
Address: 3622 GRAND FORKS DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change ( ) Addition  
Name: STARKMAN, REBECCA  
Address: 3622 GRAND FORKS DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: VD (X) Change ( ) Addition  
Name: STARKMAN, MAX  
Address: 3622 GRAND FORKS DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

Title: VD (X) Change ( ) Addition  
Name: STARKMAN, ELI  
Address: 3622 GRAND FORKS DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

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

I hereby certify that the information supplied with this filing does not qualify 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 STARKMAN

PD

07/16/2008

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

\_\_\_\_\_  
Date