

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90065 003 ***150.00

DOCUMENT # P03000025902

1. Entity Name
GILBERTO TRANSPORT, INC.



Principal Place of Business
**951 E. 31ST STREET
 HIALEAH, FL 33013**

Mailing Address
**951 E. 31ST STREET
 HIALEAH, FL 33013**

40009398

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip

01262005 Chg-P CR2E034 (10/03)

4. FEI Number
16-1656130

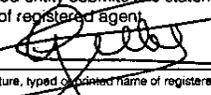
Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**PENA, GILBERTO SR
 951 E. 31ST STREET
 HIALEAH, FL 33013**

7. Name and Address of New Registered Agent
 Name **Gilberto Pena JR.**
 Street Address (P.O. Box Number is Not Acceptable) **951 E. 31 St.**
 City **Hialeah** FL Zip Code **33013**

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  DATE **1/26/05**

(NOTE: Registered Agent signature required when reinstating)

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**

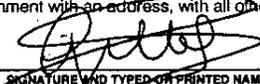
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PENA, GILBERTO JR 951 E. 31ST STREET HIALEAH, FL 33013 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PENA, GILBERTO SR 951 E. 31ST STREET HIALEAH, FL 33013 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T QUINTERO, ANGELA 951 E. 31ST STREET HIALEAH, FL 33013 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Gilberto Pena JR <input type="checkbox"/> Change <input type="checkbox"/> Addition 951 E. 31 St Hialeah, FL 33013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Gilberto Pena JR. <input type="checkbox"/> Change <input type="checkbox"/> Addition 951 E. 31 St. Hialeah, FL 33013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Gilberto Pena JR. <input type="checkbox"/> Change <input type="checkbox"/> Addition 951 E. 31 St. Hialeah, FL 33013
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(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:  DATE **1/26/05** (780) 295-4612

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR