

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026417

FILED  
Apr 22, 2004  
Secretary of State

**Entity Name:** A CLASS ABOVE TRANSPORTATION, INC.

**Current Principal Place of Business:**

2303 ISLAND CLUB WAY  
ORLANDO, FL 32822

**New Principal Place of Business:**

4275 HENRY J AVE  
STCLOUD, FL 34772

**Current Mailing Address:**

2303 ISLAND CLUB WAY  
ORLANDO, FL 32822

**New Mailing Address:**

4275 HENRY J AVE  
STCLOUD, FL 34772

**FEI Number:** 51-0453754

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FILINGS, INC.  
3732 N.W. 16TH STREET  
FT. LAUDERDALE, FL 333114132 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: MOLINA, WILLIAM  
Address: 2303 ISLAND CLUB WAY  
City-St-Zip: ORLANDO, FL 32822

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

Title: DPST (X) Change ( ) Addition  
Name: MOLINA, WILLIAM  
Address: 4275 HENRY J AVE  
City-St-Zip: STCLOUD, FL 34772

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: WILLIAM MOLINA

OWNE

04/22/2004

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

\_\_\_\_\_  
Date