

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000062818

FILED
Apr 15, 2004
Secretary of State

Entity Name: KEYS PREMIER DELIVERY & TRANSPORTATION INC.

Current Principal Place of Business:

PO BOX 6614
KEY WEST, FL 33041

New Principal Place of Business:

Current Mailing Address:

PO BOX 6614
KEY WEST, FL 33041

New Mailing Address:

FEI Number: 54-2109955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221R
PALM BEACH GARDENS, FL 331393341 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: D () Delete
Name: JERMIGAN, ROBIN L
Address: PO BOX 6614
City-St-Zip: KEY WEST, FL 33041

Title: D () Delete
Name: SANCHEZ, MARIA MERCEDES
Address: PO BOX 6614
City-St-Zip: KEY WEST, FL 33041

Title: D () Delete
Name: MCSWAIN, GREGGORY
Address: PO BOX 6614
City-St-Zip: KEY WEST, FL 33041

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JERNIGAN, ROBIN L
Address: PO BOX 6614
City-St-Zip: KEY WEST, FL 33041

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

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

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: ROBIN L. JERNIGAN

D

04/15/2004

Electronic Signature of Signing Officer or Director

_____ Date