

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077490

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: HART TRANSPORT SERVICES, INC.

## Current Principal Place of Business:

279 CYPRESS POINT DRIVE  
PALM BEACH GARDENS, FL 33418

## New Principal Place of Business:

6701 MALLARDS COVE RD  
#26D  
JUPITER, FL 33458

## Current Mailing Address:

279 CYPRESS POINT DRIVE  
PALM BEACH GARDENS, FL 33418

## New Mailing Address:

6701 MALLARDS COVE RD  
#26D  
JUPITER, FL 33458

FEI Number: 57-1178295

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: PSD ( ) Delete  
Name: HARTFORD, JAMES  
Address: 279 CYPRESS POINT DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VTD ( ) Delete  
Name: GENOVESE, LISA  
Address: 279 CYPRESS POINT DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: HARTFORD, JAMES  
Address: 6701 MALLARDS COVE RD #26D  
City-St-Zip: JUPITER, FL 33458

Title: VTD (X) Change ( ) Addition  
Name: GENOVESE, LISA  
Address: 6701 MALLARDS COVE RD #26D  
City-St-Zip: JUPITER, FL 33458

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: LISA GENOVESE

VTD

04/30/2004

Electronic Signature of Signing Officer or Director

Date