

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000093249

1. Entity Name  
YASMIN LOGISTICS, INC.



FILED

04 OCT 15 AM 9:02

Principal Place of Business  
4210 W FIG ST  
TAMPA, FL 33609 US

Mailing Address  
4210 W FIG ST  
TAMPA, FL 33609 US

REINSTATEMENT STATE  
TAMPA, FL 33609



2. Principal Place of Business

SAME AS ABOVE

3. Mailing Address

Suite, Apt. #, etc.

09212004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number  
20-0177215

Applied For  
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SANTANA, IDELSY J  
3916 W LEMON STREET  
TAMPA, FL 33609

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

*Yasmin Santana*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete  
NAME SANTANA, IDELSY Y  
STREET ADDRESS 3916 W LEMON STREET  
CITY-ST-ZIP TAMPA, FL 33609

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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STREET ADDRESS  
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TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

*Yasmin Santana*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-1-04 813-967-7584

Date

Daytime Phone #

CELL: (813) 967-7584  
DOT 1163805



P3 282  
FAX: (813) 282-7193  
MC 467836

SINCE 1977

## **YASMIN LOGISTICS, INC.**

4210 West Fig Street  
Tampa, FL 33609

October 1, 2004

Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

Dear Sir,

We did not receive the initial notice of the Annual Report being due by May 1.  
Our location has moved and we have had trouble with the mail being forwarded  
correctly. Please waive the \$400.00.late fee.

Thank-you,

Idelsy Y. Santana  
President