

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90416 009 ***150.00

DOCUMENT # P03000094158			
1. Entity Name G. KORDIS AUTO TRANSPORT, INC.			
Principal Place of Business 4757 9TH AVENUE N ST PETERSBURG, FL 33713		Mailing Address 4757 9TH AVENUE N ST PETERSBURG, FL 33713	
2. Principal Place of Business 4663 61 LANE N. Suite, Apt. #, etc.		3. Mailing Address 4663 61 LANE N. Suite, Apt. #, etc.	
City & State KENNETH CITY, FL		City & State KENNETH CITY, FL	
Zip 33709		Zip 33709	
Country		Country	
4. FEI Number 16-1681615		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KORDIS, GEORGE 4757 9TH AVENUE N ST PETERSBURG, FL 33713		7. Name and Address of New Registered Agent Name KORDIS, GEORGE Street Address (P.O. Box Number is Not Acceptable) 4663 61 LANE N. City KENNETH CITY FL Zip Code 33709	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  GEORGE KORDIS, PRES. DATE: 4-16-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D <input type="checkbox"/> Delete	NAME KORDIS, GEORGE	TITLE D/P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME KORDIS, GEORGE
STREET ADDRESS 4757 9TH AVENUE N	CITY-ST-ZIP ST PETERSBURG, FL 33713	STREET ADDRESS 4663 61 LANE N.	CITY-ST-ZIP KENNETH CITY, FL 33709
TITLE <input type="checkbox"/> Delete	NAME	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> Delete	NAME	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> Delete	NAME	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> Delete	NAME	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE <input type="checkbox"/> Delete	NAME	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME
STREET ADDRESS	CITY-ST-ZIP	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:  GEORGE KORDIS, PRES.		DATE: 4-16-04 727-430-0928	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	