

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-19-2004 90416 009 \*\*\*150.00

<b>DOCUMENT # P03000094158</b>					
<b>1. Entity Name</b> G. KORDIS AUTO TRANSPORT, INC.					
<b>Principal Place of Business</b> 4757 9TH AVENUE N ST PETERSBURG, FL 33713			<b>Mailing Address</b> 4757 9TH AVENUE N ST PETERSBURG, FL 33713		
<b>2. Principal Place of Business</b> 4663 61 LANE N. Suite, Apt. #, etc.		<b>3. Mailing Address</b> 4663 61 LANE N. Suite, Apt. #, etc.			
<b>City &amp; State</b> KENNETH CITY, FL		<b>City &amp; State</b> KENNETH CITY, FL		<b>4. FEI Number</b> 16-1681615	
<b>Zip</b> 33709		<b>Country</b>		<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  KORDIS, GEORGE 4757 9TH AVENUE N ST PETERSBURG, FL 33713				<b>7. Name and Address of New Registered Agent</b> Name: KORDIS, GEORGE Street Address (P.O. Box Number is Not Acceptable): 4663 61 LANE N. City: KENNETH CITY FL Zip Code: 33709	
<b>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.</b> SIGNATURE: <b>GEORGE KORDIS, Pres.</b> <b>4-16-04</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KORDIS, GEORGE 4757 9TH AVENUE N ST PETERSBURG, FL 33713	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P KORDIS, GEORGE 4663 61 LANE N. KENNETH CITY, FL 33709
<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<b>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.</b>					
<b>SIGNATURE:</b>		<b>GEORGE KORDIS, Pres.</b> <b>4-16-04</b> <b>127-430-0928</b>			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>			