2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000114702

City-St-Zip:

HOLLYWOOD, FL 33020 US

Entity Name: PD TRANSPORTATION SERVICES INC

FILED Jan 09, 2004 Secretary of State

Littly Na	IIIC. FD IKA	NOFORTATION SERVICES,	INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	RTH 28TH TER DOD, FL 3302				
Current Mailing Address:			New Mailing Address:		
	RTH 28TH TER DOD, FL 3302				
FEI Number	: 20-0314892	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
7805 S.W.	RG, STEVE E . 6TH COURT ION, FL 3332	•			
	e named entity e of Florida.	submits this statement for the	e purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered A	\gent	Date	
Election Car	mpaign Financii	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SALSBURG, \ 3950 NORTH) Delete VILLIAM 28TH TERRACE), FL 33020 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SALSBURG, F 3950 NORTH) Delete PAUL 28TH TERRACE), FL 33020 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SALSBURG, 0 3950 NORTH) Delete GREG 28TH TERRACE), FL 33020 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SALSBURG, F) Delete RICKI 28TH TERRACE	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: RICKI SALSBURG 01/09/2004 D