2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125700

Entity Name: LIGHTNING TRANSPORTATION SOLUTIONS, INC.

FILED May 02, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	LANDO AVE., PARK, FL 3278	#313, PMB 253 39 US				
Current Mailing Address:			New Mailing Address:			
	LANDO AVE., PARK, FL 3278	#313, PMB 253 39 US				
FEI Number:	: 35-2218580	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
501 N. OR	.L, ANGELA L LANDO AVE., PARK, FL 3278	#313, PMB 253 39 US				
	named entity : e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or bo	oth,
SIGNATUR	RE:					
		ic Signature of Registered Ag	ent		Date	_
		3(2)(b), F.S., the corporation did n	ot receive the prior notic	e.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
						ono.
Title:	, ,	Delete	Title:	,	X) Change ()Addition	
Name: Address:	P.O. BOX 5402		Name: Address:	CALDWELL, A	IDO AVE, #313, PMB 253	
City-St-Zip:	ORLANDO, FL		City-St-Zip:		K, FL 32789 US	
			J., J. L.		.,,	
Title:	VP ()	Delete	Title:	VP (X) Change ()Addition	
Name:	CALDWELL, JA		Name:	CALDWELL,		
Address:	P.O. BOX 5402		Address:		NDO AVE, #313, PMB 253	
City-St-Zip:	ORLANDO, FL	32854 US	City-St-Zip:	WINTER PAR	K, FL 32789 US	
Title:	TREA (Delete	Title:	() Change () Addition	
Name:	CALDWELL, JA		Name:	,	, ,	
Address:	501 N. ORLANI	OO AVE., #313, PMB 253	Address:			
City-St-Zip:	WINTER PARK	, FL 32789 US	City-St-Zip:			
Title:	SECR (Delete	Title:	() Change () Addition	
Name:	LAWSON, LINE		Name:	`	,	
Address:		OO AVE., #313, PMB 253	Address:			
City-St-Zip:	WINTER PARK		City-St-Zip:			

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: ANGELA L CALDWELL PRES 05/02/2005