2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000154797

Entity Name: FRIEDA GARY TRESNOWSKY EXPRESS, INC.

FILED Jul 30, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
6701 MALLARDS COVE ROAD APT. 10D JUPITER, FL 33458				717 SE LIGHTHOUSE AVENUE PORT ST. LUCIE, FL 34983			
Current Mailing Address:				New Mailing Address:			
6701 MALLARDS COVE ROAD APT. 10D JUPITER, FL 33458				717 SE LIGHTHOUSE AVENUE PORT ST. LUCIE, FL 34983			
FEI Number:	04-3781241	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status De	sired ()
Name and	Address of Cu	ırrent Registered Agent:	Name and Address of New Registered Agent:				
TRESNOWSKY, FRIEDA 6701 MALLARDS COVE ROAD APT. 10D JUPITER, FL 33458				TRESNOWSKY, FRIEDA 717 SE LIGHTHOUSE AVENUE PORT ST. LUCIE, FL 34983			
The above in the State		ubmits this statement for the pu	rpose of	f changing it	s registered o	office or registered age	ent, or both,
SIGNATURE:				07/30/2004			
Electronic Signature of Registered Agent				Date			
Election Cam		(2)(b), F.S., the corporation did not i Trust Fund Contribution (). ORS:	receive th	·		TO OFFICERS AND	DIRECTORS:
Title: Name: Address: City-St-Zip: Address: City-St-Zip: Title: Name: Address:	TRESNOWSKY, 6701 MALLARDS JUPITER, FL 33 VT () I TRESNOWSKY, 6701 MALLARDS JUPITER, FL 33 S () I MILLER, PATRIC 6701 MALLARDS JUPITER, FL 33 D () I GLAD, ELIZABE 6701 MALLARDS JUPITER, FL 33	COVE ROAD 458 Delete GARY COVE ROAD 458 Delete EK ADAM COVE ROAD 458 Delete FH COVE ROAD		Title: Name: Address: City-St-Zip: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Diame: City-St-Zip: Diame: Di	TRESNOWSKY 717 SE LIGHTH PORT ST. LUC VT (X TRESNOWSKY 717 SE LIGHTH PORT ST. LUC S (X MILLER, PATR 717 SE LIGHTH PORT ST LUCI D (X MILLER, ELIZA 717 SE LIGHTH PORT ST LUCI D (X CANTARINI, JC CANTARINI, JC	HOUSE AVENUE IE, FL 34983) Change () Addition /, GARY HOUSE AVE IE, FL 34983) Change () Addition ICK ADAM HOUSE AVENUE E, FL 34983) Change () Addition ISBETH HOUSE AVENUE E, FL 34983) Change (X) Addition ISEPH H	
Address: City-St-Zip: Title: Name: Address: City-St-Zip:	1()	Delete		Address: City-St-Zip: Title: Name: Address: City-St-Zip:	PORT ST. LUC D () SLANY, JASON) Change (X) Addition I A HOUSE AVENUE	

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: FRIEDA TRESNOWSKY PD 07/30/2004