

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90097 018 ***150.00

DOCUMENT # P04000052604

1. Entity Name
EXPRESS TRANSPORT GROUP INC.



Principal Place of Business
**4220 NW 22 AVE
MIAMI, FL 33142 US**

Mailing Address
**4220 NW 22 AVE
MIAMI, FL 33142 US**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

04042006 Chg-P CR2E034 (11/05)

City & State
Zip Country

City & State
Zip Country

4. FEI Number
56-2451976

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**OLIVA, DANIEL
4220 NW 22 AVE
MIAMI, FL, FL 33142**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

*Please take out
Juan Suarez Name.*

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **OLIVA, LAZARO**
STREET ADDRESS **4220 NW 22 AVE**
CITY-ST-ZIP **MIAMI, FL 33142**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/06 *305-636-3846*
Date Daytime Phone #

ATTACHMENT

I certify that I am familiar with and accept the responsibilities of registered agent.

P04000052604
FILED
March 25, 2004
Sec. Of State
DWHITE

Registered Agent Signature: DANIEL OLIVA

Article VI

The name and address of the incorporator is:

JUAN SUAREZ
420 E 8 ST
HIALEH, FL

20029059
#P04000052604

Incorporator Signature: JUAN SUAREZ

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
LAZARO OLIVA
4220 NW 22 AVE
MIAMI, FL. 33142 US

Article VIII

The effective date for this corporation shall be:

03/24/2004