## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000066055

Entity Name: FLOR CARGO INC.

FILED Apr 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10521 SW 158 COURT 15090 S.W. 104 STREET APT 202 APT 1215

MIAMI, FL 33196 MIAMI, FL 33196

Current Mailing Address: New Mailing Address:

10521 SW 158 COURT 15090 S.W. 104 STREET APT 202 APT 1215

MIAMI, FL 33196 AFT 1215 MIAMI, FL 33196 MIAMI, FL 33196

FEI Number: 20-1025049 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 SAMANIEGO, JUAN C
 SAMANIEGO, JUAN C

 10521 SW 158 COURT
 15090 S.W. 104 STREET

 APT 202
 APT 1215

 MIAMI, FL 33196 US
 MIAMI, FL 33196 US

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.

SIGNATURE: 04/07/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 SAMANIEGO, JUAN C
 Name:
 SAMANIEGO, JUAN C

 Address:
 10521 SW 158 COURT APT 202
 Address:
 15090 SW 104 STREET APT 1215

City-St-Zip: MIAMI, FL 33196 US City-St-Zip: MIAMI, FL 33196 US

Otty-06-21p. Wildwil, 1 E 33190 00

Title: S ( ) Delete Title: VP (X) Change ( ) Addition Name: VICTORIA. LEONEL VICTORIA. LEONEL

Address: 15090 SW 104 STREET APT 1215 Address: 15090 SW 104 STREET APT 1215

City-St-Zip: MIAMI, FL 33196 US City-St-Zip: MIAMI, FL 33196 US

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: LEONEL VICTORIA VP 04/07/2005