

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90071 008 ***158.75

DOCUMENT # P04000076276					
1. Entity Name ZOKA TRANSPORT INC.					
Principal Place of Business 1477 NW 91ST AVE BLDG 12-27 CORAL SPRINGS, FL 33071			Mailing Address 1477 NW 91ST AVE BLDG 12-27 CORAL SPRINGS, FL 33071		
2. Principal Place of Business 3315 PINEWALK DR. N. Suite, Apt. #, etc. #208		3. Mailing Address P.O. BOX 771923 Suite, Apt. #, etc. —			
City & State MARGATE, FL		City & State CORAL SPRINGS, FLORIDA		4. FEI Number 20117527	
Zip 33063		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MARKOVIC, JELICA 1477 NW 91ST AVE BLDG 12-27 CORAL SPRINGS, FL 33071			7. Name and Address of New Registered Agent Name: MILIC, JELICA Street Address (P.O. Box Number is Not Acceptable): 3315 PINEWALK DR. N. #208 City: MARGATE, FL Zip Code: 33063		
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: <u>Jelica Milic</u> (NOTE: Registered Agent signature required when reinstating) DATE: <u>2/21/05</u>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LAKIC, ZORAN 1477 NW 91ST AVE BLDG 12-27 CORAL SPRINGS, FL 33071	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ZORAN LAKIC 3315 PINEWALK DRIVE NORTH #208 MARGATE, FLORIDA 33063	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARKOVIC, JELICA 1477 NW 91ST AVE BLDG 12-27 CORAL SPRINGS, FL 33071	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JELICA MILIC 3315 PINEWALK DRIVE NORTH #208 MARGATE, FLORIDA 33063	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>Jelica Milic</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>2/21/05</u> Daytime Phone #: <u>954-755-0962</u>		