

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000076975

FILED  
Apr 04, 2005  
Secretary of State

Entity Name: STEADFAST TRANSPORT, INC.

## Current Principal Place of Business:

3425 MARLINSPIKE DRIVE  
TAMPA, FL 33607

## New Principal Place of Business:

12063 CITRUS FALLS CIRCLE  
#101  
TAMPA, FL 33625

## Current Mailing Address:

PO BOX 21162  
TAMPA, FL 336221162

## New Mailing Address:

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

## Name and Address of Current Registered Agent:

PAULSEN, ALEXANDRA M  
3425 MARLINSPIKE DRIVE  
TAMPA, FL 33607 US

## Name and Address of New Registered Agent:

PAULSEN, ALEXANDRA M  
12063 CITRUS FALLS CIRCLE  
#101  
TAMPA, FL 33625 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:

04/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PAULSEN, ROBERT W  
Address: 3425 MARLINSPIKE DRIVE  
City-St-Zip: TAMPA, FL 33607

Title: V ( ) Delete  
Name: PAULSEN, MARIA L  
Address: 3425 MARLINSPIKE DRIVE  
City-St-Zip: TAMPA, FL 33607

Title: ST ( ) Delete  
Name: PAULSEN, ALEXANDRA M  
Address: 3425 MARLINSPIKE DRIVE  
City-St-Zip: TAMPA, FL 33607

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PAULSEN, ROBERT W  
Address: 12063 CITRUS FALLS CIRCLE #101  
City-St-Zip: TAMPA, FL 33625

Title: V (X) Change ( ) Addition  
Name: PAULSEN, MARIA L  
Address: 12063 CITRUS FALLS CIRCLE #101  
City-St-Zip: TAMPA, FL 33625

Title: ST (X) Change ( ) Addition  
Name: PAULSEN, ALEXANDRA M  
Address: 12063 CITRUS FALLS CIRCLE #101  
City-St-Zip: TAMPA, FL 33625

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: ROBERT W. PAULSEN

P

04/04/2005

Electronic Signature of Signing Officer or Director

Date