

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000109478

FILED
Apr 28, 2005
Secretary of State

Entity Name: KEYMI TRUCKING CORPORATION

Current Principal Place of Business:

4630 SAINT CROIX LANE
812
NAPLES,, FL 34109 US

Current Mailing Address:

4630 SAINT CROIX LANE
812
NAPLES,, FL 34109 US

New Principal Place of Business:

3489 WINIFRED ROW LANE
2002
NAPLES,, FL 34116 US

New Mailing Address:

3489 WINIFRED ROW LANE
2002
NAPLES,, FL 34116 US

FEI Number: 20-1404194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, MANUEL E
4630 SAINT CROIX LANE
812
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

GARCIA, MANUEL E
3489 WINIFRED ROW LANE
2002
NAPLES, FL 34116 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:

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GARCIA, MANUEL E
Address: 4630 SAINT CROIX LANE STE 812
City-St-Zip: NAPLES, FL 34109 US

Title: VP () Delete
Name: FIGUEROA, ROSA M
Address: 4630 SAINT CROIX LANE STE 812
City-St-Zip: NAPLES,, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARCIA, MANUEL E
Address: 3489 WINIFRED ROW LANE
City-St-Zip: NAPLES, FL 34116 US

Title: VP (X) Change () Addition
Name: FIGUEROA, ROSA M
Address: 3489 WINIFRED ROW LANE APT. 2002
City-St-Zip: NAPLES,, FL 34116

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: ROSA FIGUEROA

VP

04/28/2005

Electronic Signature of Signing Officer or Director

Date