

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000134847

Entity Name: MAGNUM TRANSPORT, INC.

FILED
May 16, 2007
Secretary of State

Current Principal Place of Business:

133 FLORA DR
HAINES CITY, FL 33844

New Principal Place of Business:

14830 CEDAR BRANCH WAY
ORLANDO, FL 32824

Current Mailing Address:

133 FLORA DR
HAINES CITY, FL 33844

New Mailing Address:

14830 CEDAR BRANCH WAY
ORLANDO, FL 32824

FEI Number: 20-1691864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERA, ROSA
133 FLORA DR
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

FIGUEROA, HECTOR J
14830 CEDAR BRANCH WAY
ORLANDO, FL 32824 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: HECTOR J FIGUEROA

05/16/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: RIVERA, ROSA
Address: 133 FLORA DR
City-St-Zip: HAINES CITY, FL 33844

Title: SEC () Delete
Name: CASTILLO, MARISOL
Address: 133 FLORA DR
City-St-Zip: HAINES CITY, FL 33844

Title: P () Delete
Name: HECTOR JAVIER FIGUER, OA
Address: P O BOX 4154
City-St-Zip: HAINES CITY, FL 338454154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FIGUEROA, HECTOR J
Address: 14830 CEDAR BRANCH WAY
City-St-Zip: ORLANDO, FL 32824

Title: SEC (X) Change () Addition
Name: FIGUEROA, HECTOR J
Address: 14830 CEDAR BRANCH WAY
City-St-Zip: ORLANDO, FL 32824

Title: T (X) Change () Addition
Name: HECTOR JAVIER FIGUER, OA
Address: 14830 CEDAR BRANCH WAY
City-St-Zip: ORLANDO, FL 32824

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: HECTOR J FIGUEROA

P

05/16/2007

Electronic Signature of Signing Officer or Director

Date