

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000137622

FILED
Apr 29, 2005
Secretary of State

Entity Name: AMERICAB TRANSPORTATION INC.

Current Principal Place of Business:

1005 SOUTH CONGRESS AVENUE
SUITE 110
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

1005 SOUTH CONGRESS AVENUE
SUITE 110
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 20-1701175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMPLETE BUSINESS ADVISORS INC.
990 S CONGRESS AVE
#4
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FORTUNE, PATRICE
Address: 2301 S CONGRESS AVE #412
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VP () Delete
Name: FORTUNE, MARIE D
Address: 2301 S CONGRESS AVE #412
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PATRICE FORTUNE

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date