


# 2007 FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000028970	
1. Entity Name DALLAS TRANSPORT INC	

Principal Place of Business 7420 VENETIAN STREET MIRAMAR, FL 33023 US	Mailing Address 7420 VENETIAN STREET MIRAMAR, FL 33023 US
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DO NOT WRITE IN THIS SPACE

FILED  
07 SEP 18 AM 9:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



09042007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2377112	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  URENA, FRAUDE O 7420 VENETIAN STREET MIRAMAR, FL 33023
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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**FILE NOW!!! FEE IS \$150.00  
Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P URENA, FRAUDE O 7420 VENETIAN STREET MIRAMAR, FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>9/8/19</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

900109550389  
09/18/07--01015--011 \*\*150.00

DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Fraude O. Urena</i>	Date: <i>9/4/07</i>	Daytime Phone #: <i>954558-8414</i>
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