2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR) :

SIGNATURE: ≤

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Mar 08, 2006 8:00 am Secretary of State DOCUMENT # P05000100046 02-15-2006 90054 046 ***150.00 t. Entity Name SHEILA TRANSPORT, INC Principal Place of Business Mailing Address 5323 N. W. 3TH STREET MIAMI FL 33126 5323 N. W. 3TH STREET MIAMI FL 33126 2. Principal Place of Business 3. Mailing Address 5323 NW 3 TH STREET 5323 NW 3 TH STREET Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E034 (10/05) City & State City & State Applied For 4. FEI Number 52 2449443 Not Applicable MIGHT MIGHI Country Zip \$8.75 Additional 5. Certificate of Status Desired 33126 33126 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PEREZ, GERARDO Street Address (P.O. Box Number is Not Acceptable) 5323 N.W. 3TH STREET MIAMI FL 33126 Zip Code 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 SIGNATURE Copynitume, hyperf or prunted name of registered agent seat tide is applicable. (NCITE: Registored Agent signature required when revisitable)) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution, Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Detete DILE TITLE Addition Change | MALES PEREZ, GERARDO NAME STREET ADDRESS 5323 N.W. 3TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33126 CITY-ST-ZIP TITLE Delete Change TITLE ■ Addaion NAME HAME STREET ADDRESS STREET ADDRESS C11Y-51-24P CITY-ST-ZIP THE ☐ De cte 11111 Chang Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY - ST - ZIP MILE ☐ Defete TITLE ☐ Chance ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-ST-ZIP Delete TITLE ☐ Change TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BILLE Delete TITLE Change Addition IWE NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP C1TY - ST - ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

FILED



February 17, 2006

SHEILA TRANSPORT, INC 5323 NW 3TH STREET MIAMI, FL 33126

Subject: SHEILA TRANSPORT, INC

Reference Number:

P05000100046

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/CD ANNUAL REPORTS SECTION