

2007 FOR PROFIT CORPORATION ANNUAL REPORT

09-04-2007 90042040 ***158.75

P06000029128

DOCUMENT # P06000029128

1. Entity Name
MIDWELL TRANSPORT INC



07 OCT 15 AM 11:47

QUICK SERVICE STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
200 S STARCREST DRIVE
SUITE 236
CLEARWATER, FL 33765 US

Mailing Address
200 S STARCREST DRIVE
SUITE 236
CLEARWATER, FL 33765 US

2. Principal Place of Business - No P.O. Box #
3432 MONTICELLO ST.

3. Mailing Address
3432 MONTICELLO ST.

Suite, Apt. #, etc.
HOLIDAY FLORIDA

Suite, Apt. #, etc.

08242007 Chg-P CR2E034 (12/06)

City & State

City & State
HOLIDAY FLORIDA

4. FEI Number
20-4402889

Applied For
Not Applicable

Zip 34690

Country
PASCO

Zip 34690

Country
PASCO

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NOTORLEVA, KURT
200 S STARCREST DRIVE
SUITE 236
CLEARWATER, FL 33765

Name
KURT NOTORLEVA

Street Address (P.O. Box Number is Not Acceptable)

3432 MONTICELLO ST.

City HOLIDAY FL. FL Zip Code 34690

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 *Kurt Notorleva*

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

8-30-07

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D P
NOTORLEVA, KURT
200 S STARCREST DRIVE STE 236
CLEARWATER, FL 33765 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
3432 MONTICELLO ST
HOLIDAY FLORIDA
34690 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

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: *Kurt Notorleva*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(727)
8-30-07 502-7700
Date Daytime Phone #

ATTACHMENT

2/2

40131161
P06000029/28

Spoke with a woman on the phone who said
leave a letter explaining I moved and did
not receive the first letter, sorry for the laps
of time. I hope you Department will waive
my tardiness this time.

Thank you
very much

Kurt Notula
- MIDWEST TRANSPORT -