## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000044791

Entity Name: ULTIMATE CARRIERS, INC.

3474 WEST 84TH ST BAY 105

HIALEAH, FL 33018 US

Address: City-St-Zip: FILED Sep 05, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3474 WEST 84TH ST **BAY 105** HIALEAH, FL 33018 **New Mailing Address: Current Mailing Address:** 3474 WEST 84TH ST **BAY 105** HIALEAH, FL 33018 FEI Number: 20-4916873 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHIONG, IRMA 3474 WEST 84TH ST **BAY 105** HIALEAH, FL 33018 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CHIONG, IRMA Name: Name: 3474 WEST 84TH ST BAY 105 Address: Address: City-St-Zip: HIALEAH, FL 33018 US City-St-Zip: ( ) Delete Title: VΡ Title: () Change () Addition Name: CHIONG, IRMA Name: 3474 WEST 84TH ST BAY 105 Address: Address: HIALEAH, FL 33018 US City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition CHIONG, IRMA Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: IRMA CHIONG P 09/05/2007