2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2007 8:00 am Secretary of State 04-30-2007 90417 037 ***150.00

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1. Entity Nam AMERICA	MENT #P06000118 TRANSPORT SERVICES							.007 70	417 03	7 ***15	70.00
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Suite, Apt. 8, etc. 318 Suite, Apt. 8, etc. 318 City & State Country E. Certificate of Status Desired See Registered Agent Name and Address of Current Registered Agent CABRERA, PAVEL City MIAMI, FL :33122 City MIAMI, FL :33122 City MIAMI FL :32 pcode 3317 8. The above nemidd entity suffrict his proteinent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered reme of impatreed agent and the facts and contents of the collispations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent, or both, in the State of Florida. I am familiar weth, and access the obligations of registered agent of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar weth, and access the familiary	7500 NW 25	ST STE 209	7500 NW 25 ST STE 2	209				•				
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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 oxinity. Because the execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Block 10 or Block 11.	FIL After Mi 10. IIILE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0 OFFICERS AND PD CABRERA, PAVEL 7500 NW 25 ST STE 209	9. Election Campa Trust Fund Con DIRECTORS Delete Delete Delete	aign Finan Itribution 11. TITLE NAME STREE CITY-	E ET ADDRESS -ST-ZIP ET ADDRESS	\$5.0 Adde	DO May Be d to Fees ADDITIONS BRELA	Pavel aineble	do B	(100)	Change Change Change	Addition Addition Addition Addition