

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000000259

FILED  
Apr 01, 2008  
Secretary of State

Entity Name: CUBAN SURPRISE TRUCKING CORP

## Current Principal Place of Business:

11901 FOX HILL ROAD  
NORTH FORT MYERS, FL 33917

## New Principal Place of Business:

283 NEMO CIRCLE N.E.  
PALM BAY, FL 32907

## Current Mailing Address:

11901 FOX HILL ROAD  
NORTH FORT MYERS, FL 33917

## New Mailing Address:

283 NEMO CIRCLE N.E.  
PALM BAY, FL 32907

FEI Number: 20-8136760

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARCIA, GIOMAR  
11901 FOX HILL ROAD  
NORTH FORT MYERS, FL 33917 US

## Name and Address of New Registered Agent:

GARCIA, GIOMAR  
283 NEMO CIRCLE N.E.  
PALM BAY, FL 32907 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: GIOMAR GARCIA

04/01/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GARCIA, GIOMAR  
Address: 11901 FOX HILL ROAD  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: VP ( ) Delete  
Name: GARCIA, OSMAR P  
Address: 11901 FOX HILL ROAD  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: S ( ) Delete  
Name: VALDES, LUZ M  
Address: 11901 FOX HILL ROAD  
City-St-Zip: NORTH FORT MYERS, FL 33917

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GARCIA, GIOMAR  
Address: 283 NEMO CIRCLE N.E.  
City-St-Zip: PALM BAY, FL 32907

Title: VP (X) Change ( ) Addition  
Name: GARCIA, OSMAR P  
Address: 283 NEMO CIRCLE N.E.  
City-St-Zip: PALM BAY, FL 32907

Title: S (X) Change ( ) Addition  
Name: VALDES, LUZ M  
Address: 283 NEMO CIRCLE N.E.  
City-St-Zip: PALM BAY, FL 32907

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.

SIGNATURE: GIOMAR GARCIA

P

04/01/2008

Electronic Signature of Signing Officer or Director

Date