


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90391 036 ***158.75

DOCUMENT # P92000011908

1. Entity Name
 FLORIDA 2-WAY SERVICE, INC.



Principal Place of Business
 2700 DAVIE ROAD
 DAVIE, FL 33314 US

Mailing Address
 C/O IVAN A. GOMEZ
 601 BRICKELL KEY DR, SUITE 507
 MIAMI, FL 33131 US

24030165



DO NOT WRITE IN THIS SPACE

03082004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0387624	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

IAG CORPORATE SERVICES, INC.
 601 BRICKELL KEY DR., STE. 507
 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PUDSEY, RICHARD F 2700 DAVIE RD DAVIE, FL 33314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PEDERSEN, DAVID A 2700 DAVIE RD DAVIE, FL 33314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RODRIGUEZ, MIGUEL 2700 DAVIE RD DAVIE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Richard Pudsey - Sec 3/29/04 305-371-9213
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

RICHARD PUDSEY - sec.