

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90149 029 ***158.75

DOCUMENT # P94000070399 1. Entity Name INTRANSIT SERVICES INC.																											
Principal Place of Business 2746 NW 112TH AVE MIAMI, FL 33172 US		Mailing Address 2746 NW 112TH AVE MIAMI, FL 33172 US																									
2. Principal Place of Business 6332 NW 97 AVE Suite, Apt. #, etc.		3. Mailing Address 6332 NW 97 AVE Suite, Apt. #, etc.																									
City & State Doral, FL Zip 33178 Country USA		City & State Doral, FL Zip 33178 Country USA																									
4. FEI Number 65-0521998		Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent BOTIFOLL, ERNESTO R 2746 NW 112 AVE MIAMI, FL 33172		7. Name and Address of New Registered Agent Name ERNESTO R BOTIFOLL Street Address (P.O. Box Number is Not Acceptable) 6332 NW 97 AVE City Doral FL Zip Code 33178																									
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 <u><i>[Signature]</i></u> DATE <u>3/7/05</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																									
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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: <u><i>[Signature]</i></u>		Date <u>3/7/05</u> Daytime Phone # <u>305-591-7570</u>																									