07-16-2004 90008 021 *** 150:00 P94000091508

2004 FOR PROFIT CORPORATION ANNUAL REPORT

							~ ~		
DOCUMENT # P94000091508] FILED				
1. Entity Name						04 JUL 23	AM IO: 32		
EXPRESS ONE TRUCKING, INC.			- 1			04 005 23	WII 10. 25		
				N. T.		SECRETARY	OF STATE		
Principal Place					ALLAHASSI	EĔ, FĽORÍDA 540627			
2016 B 51ST STREET SOUTH 2016 B 51ST STREET SOU							540627	30	
TAMPA, FL 33619 TAMPA, FL 33619					}	_			
2. Principal Place of Business 3. Mailing Address						WWWWW.			
Suite, Apt. #, etc. Suite, Apt. #, etc.					07122004	Chg-P	CR2E034 (10/03)		
							<u> </u>		
City & State City & State					4, FEI Number 59-3284		·	plied For t Applicable	
Zip	Country Zip Cot		Coun	try	5. Cartificate of Status Desired			inlonal	
				,	Fee Required			4	
B. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
NATION ANCELL NATION CONTROL									
MITTONEORO DRAE 9938 TIMMONS Rd				Street Address (P.O. Box Number is Not Acceptable)					
BRANDON EL 33511 Thonotosassa FL 33592]	
	* **			City			FL Zip Code	-	
8. The above	named entity submits this statement to	rectister	ed office or register	red agent, or bot	h. in the State of Flor		and accept		
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 I laughor VP 7-9-04									
Strature, typed of Chiteri name of registered ago, and title I epickable. (MOTE: Registered Ago II cignisture required when remetating) DATE									
# 31	LE NOW!!!: FEE IS \$150.00	ncing \$5.	.00 May Be	to accordance w	ith s. 607.193(2)(b),	EQ the			
ł	ue by September 8, 2004	Trust Fund Contr		ed to Fees	corporation did r	ot receive the prior r	notice.		
10.	OFFICERS AND	DIRECTORS	11.	·····	ADDITIONS/	CHANGES TO OFFI	CERS AND DIRECTORS	SIN 11	
TITLE	Р	Delete '	TILL				Change	(Addition	
HAME STREET ADDRESS	0000 T			E ET ADORESS					
BRANDON F 33511 Thonstosessa P 33592				-ST-2IP				1	
TITLE	VP Delete		TITL	E			☐ Change	Addition	
NAME	NAIPHOR, ANGELA 1441 POXBORO BRIVE-9938 TIMMENS RCL			NE .				,	
CITY-ST-ZIP				ET ADDRESS -St-ZP				1	
TITLE	1110/10		TITL				☐ Change	[] Addition	
NAME	}		NAM	E }					
STREET ADDRESS CITY-ST-ZIP		<u> </u>		-ST-ZIP		÷~	المراجعة المراجعة	-	
TITLE	\$ 1. H	Delete	TITL				☐ Change	☐ Addition	
NAME			NAM	1			□ ⇔vie	المستمدر ت	
STREET ADDRESS			•	ET ADDRESS				- 1	
CITY-ST-ZIP	<u> </u>		-	-ST-ZIP				-	
NAME NAME		☐ Delete	TITL.				☐ Change	Addition	
STREET ADDRESS				EET ADDRESS		٠, ٨	2/02		
CITY-ST-ZIP			CITY	-ST-ZP		7/1	(コ/ひ)		
TITLE	,	Celete	ntu VAN	1		111	Change	☐ Addition	
STREET ADDRESS	ξ		NAM STRI	EET ADORESS		7		}	
CHY-S1-ZIP			cm	-ST-ZIP					
12. I hereby certify that the information supplied with this filling 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 it 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 attachyeor with an address, with all other like empowered.									
SIGNATURE: Signature and types on Printics have or signing officer or director Uses Objects Provide									
		I LIMBI DE LA COLONIA COLONIAL CONTRACTOR	-11				brates a refuge a	1	