

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000040183

FILED
Apr 26, 2005
Secretary of State

Entity Name: DEDICATED TRANSPORTATION OF FLORIDA, INC.

Current Principal Place of Business:

2200 NW 110TH AVE 302
MIAMI, FL 33182

New Principal Place of Business:

2200 NW 110TH AVE
SUITE 302
MIAMI, FL 33172

Current Mailing Address:

PO BOX 227008
MIAMI, FL 33122

New Mailing Address:

FEI Number: 65-0756372 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ACOSTA, GLADYS
2200 NW 110TH AVE
MIAMI, FL 33182 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: ACOSTA, GLADYS
Address: 2200 NW 110TH AVENUE
City-St-Zip: MIAMI, FL 33182

Title: V () Delete
Name: ACOSTA, SAM
Address: 4696 SW 159TH CT.
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ACOSTA, GLADYS
Address: 2200 NW 110TH AVENUE
City-St-Zip: MIAMI, FL 33172

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SAM ACOSTA

VP

04/26/2005

Electronic Signature of Signing Officer or Director

Date