## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000030926

FILED Feb 03, 2005 Secretary of State

Entity Name: UNITRANS	FER FLORIDA, INC.			
Current Principal Place o	of Business:	New Principal Place of	of Business:	
901 S. STATE ROAD 7 SUITE 215 HOLLYWOOD, FL 33023	US			
Current Mailing Address	:	New Mailing Address	:	
901 S. STATE ROAD 7 SUITE 215 HOLLYWOOD, FL 33023	US			
FEI Number: 65-0827359	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
RICARDO BAJANDAS 2699 S. BAYSHORE DRIV 7TH FLOOR MIAMI, FL 33133 US	Ε			
The above named entity su in the State of Florida.	bmits this statement for the po	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic	Signature of Registered Age	nt	Date	
Election Campaign Financing 1	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: AS () D Name: BAJANDAS, RICA	elete RDO	Title: D Name: CASTERA, A	(X) Change()Addition DIEN	

2699 S BAYSHORE DRIVE Address: 901 SOUTH STATE ROAD 7 Address: City-St-Zip: MIAMI, FL 33133 US City-St-Zip: HOLLYWOOD, FL 33023 US Title: () Delete Title: (X) Change ( ) Addition SALIBA, JEAN C Name: Name:

SALIBA, JEAN C Address:

901 SOUTH STATE ROAD 7 Address: 901 SOUTH STATE ROAD 7 HOLLYWOOD, FL 33023 HOLLYWOOD, FL 33023 City-St-Zip: City-St-Zip:

Title: ( ) Change (X) Addition Title: ( ) Delete

Name: Name: EXUME, CLAUDE Address: Address: 901 SOUTH STATE ROAD 7 City-St-Zip: City-St-Zip: HOLLYWOOD, FL 33023

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: ADRIEN CASTERA D 02/03/2005