

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000001173

FILED
Apr 26, 2004
Secretary of State

Entity Name: H & M TRANSPORTATION, INC.

Current Principal Place of Business:

4810 GRAINARY AVE
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

P O BOX 271408
TAMPA, FL 336881408

New Mailing Address:

FEI Number: 59-3551292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

CARL T. WATKINS, P.A.
5103 MEMORIAL HIGHWAY
TAMPA, FL 33634 US

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: CARL T. WATKINS

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONTALBANO, STEFANIE
Address: 15101 MONET DRIVE
City-St-Zip: TAMPA, FL 33613

Title: STD () Delete
Name: MONTALBANO, STEFANIE
Address: 15101 MONET DRIVE
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: STAFANIE MONTALBANO

PD

04/26/2004

Electronic Signature of Signing Officer or Director

Date