


2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91005 021 ***150.00

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|---|---|
| DOCUMENT # P99000091577 1. Entity Name M4D TRUCKING, INC. |  |
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| Principal Place of Business 2214 W. FIRWOOD DR. DELTONA, FL 32725 | Mailing Address 2214 W. FIRWOOD DR. DELTONA, FL 32725 |
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DO NOT WRITE IN THIS SPACE



01152004 No Chg-P CR2E034 (10/03)

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|---|--------------------------------|
| 4. FEI Number 59-3603793 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

SCHWARTZ, DENZIL
2214 W. FIRWOOD DR.
DELTONA, FL 32725

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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: Denzil Schwartz DATE: 4/15/04

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, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

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|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD SCHWARTZ, DENZIL 2214 W. FIRWOOD DR. DELTONA, FL 32725 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD SCHWARTZ, MARILYN 2214 W. FIRWOOD DR. DELTONA, FL 32725 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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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: Denzil Schwartz DATE: 4/15/04 DAYTIME PHONE # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR