


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 31, 2004 08:00 AM
Secretary of State**

DOCUMENT # P99000109557 1. Entity Name MATTOY TRANSPORT, INC.	
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Principal Place of Business 8115 PETERSON RD ODESSA, FL 33556	Mailing Address 8115 PETERSON RD ODESSA, FL 33556
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03202004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3613580	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
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5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SANTIAGO, ROSA M
8115 PETERSON RD
ODESSA, FL 33996**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**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**

1100000100133

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD NIEVES, ROLANDO 8115 PETERSON RD ODESSA, FL 33556
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD SANTIAGO, ROSA M 8115 PETERSON RD ODESSA, FL 33556
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**DO NOT WRITE
IN THIS SPACE**

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: Rolando Nieves **ROLANDO NIEVES, PRESIDENT** **MARCH 24, 2004** **(813) 926-7580**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #