2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000007450

SULTAN, KAMRAN U

7865 WINDOVER WAY

TITUSVILLE, FL 32780

Name:

Address:

City-St-Zip:

FILED Apr 29, 2008 Secretary of State

Entity Nar	ne: TRANSCO	DRP USA INC.			
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
5695 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32839			7865 WINDOVER W TITUSVILLE, FL 32		
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
5695 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32839				7865 WINDOVER WAY TITUSVILLE, FL 32780	
FEI Number:	59-3692049	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
SULTAN, AZMI 7865 WINDOVER WAY TITUSVILLE, FL 32780 US			SULTAN, AZMI PD 7865 WINDOVER W TITUSVILLE, FL 32		
	named entity s of Florida.	ubmits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATURE: AZMI SULTAN				04/29/2008	
	Electroni	c Signature of Registered Age	ent	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () SULTAN, AZMI 7865 WINDOVE TITUSVILLE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SECT () SULTAN, GLENI 7865 WINDOVE TITUSVILLE, FL	R WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TREA () SULTAN, GLENI 7865 WINDOVE TITUSVILLE, FL	R WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	V.P. ()	Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

SIGNATURE: AZMI SULTAN 04/29/2008 PD