2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 341750

Entity Name: TRANS-MARKET SALES & EQUIPMENT, INC.

FILED Jan 06, 2009 Secretary of State

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

8915 MAISLIN DR, TAMPA, FL 33637 8915 MAISLIN DR.

PO BOX 16651 TAMPA, FL 33637 TEMPLE TERRACE, FL 33687

Current Mailing Address: New Mailing Address:

PO BOX 16651 P.O. BOX 16651

TEMPLE TERRACE, FL 33687 US TEMPLE TERRACE, FL 33687 US

FEI Number: 59-1289394 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANTI, KEITH P
8915 MAISLIN DR.
TAMPA, FL 33637 US
SANTI, KEITH P
8915 MAISLIN DR.
TAMPA, FL 33637 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: KEITH SANTI 01/06/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

Name: SANTI, RYAN Name: SANTI, RYAN V
Address: 8304-3 MANOR CLUB CIRCLE Address: 8304-3 MANOR CLUB CIRCLE

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647 US

Title: ST () Delete Title: ST (X) Change () Addition Name: KYLE, SANTI Name: SANTI, KYLE ST

Name: KYLE, SANTI Name: SANTI, KYLE ST
Address: 8304-3 MANOR CLUB CIRCLE Address: 8304-3 MANOR CLUB CIRCLE

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647 US

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

 Name:
 SANTI, KEITH
 Name:
 SANTI, KEITH P

 Address:
 5308 BURCHETTE RD.
 Address:
 5308 BURCHETTE RD.

 City-St-Zip:
 TAMPA, FL
 City-St-Zip:
 TAMPA, FL
 33647 US

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.

SIGNATURE: KEITH SANTI P 01/06/2009