2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004854

Entity Name: KEMIRON-TRANS, INC.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
316 BARTO	DW MUNICIPAL FL 338308727			New I IIII	pair face of bus	siliess.		
Current Mailing Address:				New Mailing Address:				
	W MUNICIPAL FL 338308727	AIRPORT						
FEI Number:	59-3446856	FEI Number Applied For ()	FEI Num	ber Not Appli	cable () Ce	rtificate of Status Desired ()		
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
EVIN NETZER 316 BARTOW MUNICIPAL AIRPORT BARTOW, FL 338308727 US				NETZER, EVIN L 316 BARTOW MUNICIPAL AIRPORT BARTOW, FL 338308727 US				
The above in the State		bmits this statement for the pu	rpose of	changing it	s registered office	e or registered agent, or both	٦,	
SIGNATUR	E: EVIN L. NE	TZER				05/01/2006		
	Electronic	Signature of Registered Agen	t			Date	_	
Election Cam		2)(b), F.S., the corporation did not r Trust Fund Contribution ().				OFFICERS AND DIRECTO	JDG.	
							JNJ.	
Title: Name: Address: City-St-Zip:	HJERSTED, LAW	JNICIPAL AIRPORT		Title: Name: Address: City-St-Zip:	()Cha	nge () Addition		
Title: Name: Address: City-St-Zip:	MARKER, JOHN	Delete JNICIPAL AIRPORT 8308727		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition		
Title: Name: Address: City-St-Zip:	HISKEN, JOHN	Delete JNICIPAL AIRPORT 8308727		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition		
Title: Name: Address: City-St-Zip:	NETZER, EVIN L	Delete JNICIPAL AIRPORT 8308727		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition		
Title: Name: Address: City-St-Zip:	LIVENGOOD, RO	JNICIPAL AIRPORT		Title: Name: Address: City-St-Zip:	CFO (X) Cha TENNY, JERRALD 316 BARTOW MUNI BARTOW, FL 3383			
Title: Name: Address: City-St-Zip:	BRITT, DANIÈL	Delete JNICIPAL AIRPORT 8308727		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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: EVIN L. NETZER MR. 05/01/2006