2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005495

Entity Name: INTRANS GROUP, INC.

FILED Feb 04, 2009 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:		
55 CHERRY LANE CARLE PLACE, NY 11514					
Current Mailing Address:			New Maili	New Mailing Address:	
C/O FOX HORAN - 825 THIRD AVE NEW YORK, NY 10022					
FEI Number: 13-3014754 FEI Number Applied For () FEI Num			El Number Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NATIONAL CORPORATE RESEARCH,LTD., INC. 515 E. PARK AVE. TALLAHASSEE, FL 32301 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:					
	Electronic	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADD			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DONATH, PATRIC		Title: Name: Address: City-St-Zip:	D (X) Change () Addition DONATH, PATRICK CSSI, 22 AVENUE GALILEE LE PLESSIS ROBINSON, NA 92350 FR	
Title: Name: Address: City-St-Zip:	P () [BOULARD, ERIC 55 CHERRY LAN CARLE PLACE, I	E	Title: Name: Address: City-St-Zip:	P (X) Change () Addition QUEMARD, ARNAUD 55 CHERRY LANE CARLE PLACE, NY 11514	
Title: Name: Address: City-St-Zip:	MARSCHNER, E	5 THIRD AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ()[BARBA, JOSEPH 55 CHERRY LAN CARLE PLACE, I	E	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	LINDQUIST, ERI	5 THIRD AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ()[MOORE, RON 55 CHERRY LAN CARLE PLACE, I		Title: Name: Address: City-St-Zip:	D (X) Change () Addition ABEHSERA, DANIEL CSSI, 22 AVENUE GALILEE LE PLESSIS ROBINSON, NA 92350 FR	

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: EDWARD C. MARSCHNER S 02/04/2009