

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H52077

Entity Name: FORTTRAN, INC.

FILED  
May 23, 2007  
Secretary of State

**Current Principal Place of Business:**

318 S.W. 15TH ST.  
DANIA, FL 33004

**New Principal Place of Business:**

**Current Mailing Address:**

318 S.W. 15TH ST.  
DANIA, FL 33004

**New Mailing Address:**

227 SE 9TH STREET  
DANIA, FL 33004

FEI Number: 59-2646080

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DESOUZA, HAMILTON J.  
227 S.E. 9TH ST.  
DANIA, FL 33004 US

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

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DESOUZA, HAMILTON J PRES  
Address: 227 SE 9TH ST  
City-St-Zip: DANIA, FL

Title: VS ( ) Delete  
Name: DESOUZA, CATHERINE A V,S  
Address: 227 S.E. 9TH ST.  
City-St-Zip: DANIA, FL 33004 US

Title: VP (X) Delete  
Name: DESOUZA, HELIO  
Address: 1000 NORTH 22 AVE  
City-St-Zip: HOLLYWOOD, FL 33019

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: HAMILTON DESOUZA

PRES

05/23/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date