

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K95939

Entity Name: TXL RACK SYSTEMS, INC.

FILED
Jan 23, 2008
Secretary of State

Current Principal Place of Business:

7075 WEST 20TH AVENUE
HIALEAH, FL 33014 US

New Principal Place of Business:

Current Mailing Address:

7075 WEST 20TH AVENUE
HIALEAH, FL 33014 US

New Mailing Address:

FEI Number: 65-0154402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PACA, KATHLEEN
7075 WEST 20TH AVENUE
HIALEAH, FL 33014 US

Name and Address of New Registered Agent:

FALLON, KIERAN P PA
436 SW 8TH STREET
#200
MIAMI, FL 33130 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: KIERAN P FALLON PA

01/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PEREZGILL, JORGY L
Address: 7075 WEST 20TH AVENUE
City-St-Zip: HIALEAH, FL 33014

Title: D () Delete
Name: PEREZ, MIGUELITO
Address: 7075 WEST 20TH AVENUE
City-St-Zip: HIALEAH, FL 33014

Title: VT () Delete
Name: PACA, KATHLEEN
Address: 7075 WEST 20TH AVENUE
City-St-Zip: HIALEAH, FL 33014

Title: S (X) Delete
Name: PEREZ, JOEY
Address: 7075 WEST 20 AV
City-St-Zip: HIALEAH, FL 33014

Title: D (X) Delete
Name: FERNANDEZ, CESARE
Address: 7075 WEST 20 AV
City-St-Zip: HIALEAH, FL 33014

Title: D (X) Delete
Name: LENCIONI, RICARDO
Address: 7075 WEST 20 AV
City-St-Zip: HIALEAH, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: PACA, KATHLEEN A
Address: 7075 WEST 20TH AVENUE
City-St-Zip: HIALEAH, FL 33014

Title: VD (X) Change () Addition
Name: PEREZ, MIGUEL
Address: 7075 WEST 20TH AVENUE
City-St-Zip: HIALEAH, FL 33014

Title: D (X) Change () Addition
Name: FERNANDEZ, CESAR
Address: 7075 WEST 20TH AVENUE
City-St-Zip: HIALEAH, FL 33014

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: KATHLEEN ANN PACA

P

01/23/2008

Electronic Signature of Signing Officer or Director

Date