


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

**FILED**  
**Feb 12, 2008 8:00 am**  
**Secretary of State**

02-12-2008 90065 047 \*\*\*138.75

<b>DOCUMENT # L07000065243</b>		
1. Entity Name <b>CARTRANS INTERNATIONAL LLC</b>		
Principal Place of Business <b>17707 NW MIAMI CT, SUITE 10618 MIAMI FL 33169</b>		Mailing Address <b>17707 NW MIAMI CT, SUITE 10618 MIAMI FL 33169</b>



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E083 (10/07)

4. FEI Number <b>22-3965607</b>	Applied For <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent <b>SPIEGEL &amp; UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI FL 33145</b>		7. Name and Address of New Registered Agent Name <b>Arthur Moroz</b> Street Address (P.O. Box Number is Not Acceptable) <b>17707 NW MIAMI CT # 106</b> City <b>MIAMI</b> FL Zip Code <b>33169</b>	
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8. 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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE Arthur Moroz (NOTE: Registered Agent signature required when registering) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008, Fee Will Be \$538.75**  
**Make Check Payable to Florida Department of State**

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE <b>MGR</b>	<input type="checkbox"/> Delete <b>MOROZ, ARTHUR</b> STREET ADDRESS <b>1111 KANE CONCOURSE, SUITE 518</b> CITY-ST-ZIP <b>BAY HARBOR ISLAND FL 33154</b>	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<b>CEO</b> <b>JACOB GITMAN</b> STREET ADDRESS <b>1111 KANE CONCOURSE # 518</b> CITY-ST-ZIP <b>BAY HARBOR ISLANDS FL 33154</b>
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<b>CEO</b> <b>GERMAN LISOGORSKY</b> STREET ADDRESS <b>350 WEST PASSAIC STREET</b> CITY-ST-ZIP <b>ROCHELL PARK NJ 07062</b>
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Arthur Moroz 02/02/08 9544945447  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Cayman Phone #