

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000126052

FILED  
Jan 13, 2009  
Secretary of State

Entity Name: TTR MULTIMODAL FREIGHT FORWARDER, LLC

**Current Principal Place of Business:**

2025 N.W. 102 AVE., UNIT 111  
MIAMI, FL 33172

**New Principal Place of Business:**

8336 NW 68TH STREET  
MIAMI, FL 33166

**Current Mailing Address:**

ATTN: LEON ZILBERSZTAJEN  
111 N. POMPANO BEACH BLVD., #408  
POMPANO BEACH, FL 33062

**New Mailing Address:**

8336 NW 68TH STREET  
MIAMI, FL 33166

FEI Number: 26-1625289

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ZILBERSZTAJEN, LEON  
111 N. POMPANO BEACH BLVD., #408  
POMPANO BEACH, FL 33062 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ZILBERSZTAJEN, LEON  
Address: 111 N. POMPANO BEACH BLVD., #408  
City-St-Zip: POMANO BEACH, FL 33062

Title: MGRM ( ) Delete  
Name: MIRANDA, ANTONIO  
Address: 300 S.W. 3RD AVE.  
City-St-Zip: MIAMI, FL 33129

Title: MGRM (X) Delete  
Name: PINTO, PAULO E  
Address: R. ALAGOAS CONJUNTO 1001 FUNCIONARIOS  
City-St-Zip: BELLO HORIZONTE, BRAZIL, XX

**ADDITIONS/CHANGES:**

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 is true and accurate and that my electronic 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: LEON ZILBERSZTAJEN

MGRM

01/13/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date