2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M35291

Mar 02, 2009 Secretary of State

FILED

Entity Name: AMERITRANS WORLD GROUP, INC.

Current Principal Place of Business: New Principal Place of Business: 7102 N.W. 50TH STREET MIAMI, FL 331665636 US **Current Mailing Address: New Mailing Address:** P.O. BOX 520507 GMF MIAMI, FL 331520507 US FEI Number: 59-2693106 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEON, MARTIN 7102 NW 50TH STREET MIAMI, FL 33166 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LEON, MARTIN Name: Name: 3684 S.W. 21ST STREET Address: Address: City-St-Zip: MIAMI, FL 33145 City-St-Zip: VPD Title: Title: () Delete () Change () Addition Name: OCAMPO, CESAR Name: 12317 S.W. 95TH TERRACE Address: Address: MIAMI, FL 33186 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition AVP GUILLERMO, VEGA HENRY, ZULUAGA Name: Name: 17412 SW 33RD ST 835 S. W. 154TH PATH Address: Address: City-St-Zip: MIRAMAR, FL 33029 City-St-Zip: MIAMI, FL 33194 Title: VPD () Delete Title: () Change () Addition OSPINA, CARLOS Name: Name: Address: 15630 S.W. 49TH STREET Address: City-St-Zip: MIAMI, FL 33185 City-St-Zip: Title: SD Title: AVP () Delete (X) Change () Addition OCAMPO, ANDRES Name: LEON, JAIRO Name: 12317 SW 95TH TERR Address: 5701 N. W. 112TH COURT Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33182 Title: () Delete Title: (X) Change () Addition VALENCIA, CLAUDIA Name: Name: GUSTAVO, ESCOBAR 3812 SW 133RD PLACE Address: Address: 768 N. W. 132ND COURT City-St-Zip: MIAMI, FL 33185 City-St-Zip: MIAMI, FL 33182

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: MARTIN LEON PD 03/02/2009