

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M56950

Entity Name: MMG TRANSPORTATION, INC.

FILED  
Mar 25, 2009  
Secretary of State

## Current Principal Place of Business:

4413 N. HESPERIDES ST.  
TAMPA, FL 33614

## New Principal Place of Business:

## Current Mailing Address:

C/O LOUIS A. MINARDI JR.  
4413 N. HESPERIDES ST.  
TAMPA, FL 33614

## New Mailing Address:

MMG TRANSPORTION  
4413 N. HESPERIDES ST.  
TAMPA, FL 33614

FEI Number: 59-2867971

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MINARDI, GLENN A  
4413 N. HESPERIDES ST.  
TAMPA, FL 33614 US

## Name and Address of New Registered Agent:

MINARDI, GLENN A SR  
4413 N. HESPERIDES ST.  
TAMPA, FL 33614 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: GLENN A. MINARDI SR.

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MINARDI, LOUIS A JR  
Address: 4413 N. HESPERIDES ST  
City-St-Zip: TAMPA, FL 33614

Title: STD ( ) Delete  
Name: MINARDI, GLENN A  
Address: 4413 N. HESPERIDES ST.  
City-St-Zip: TAMPA, FL 33614

Title: D ( ) Delete  
Name: MINARDI, JOSEPH  
Address: 4413 N. HESPERIDES ST.  
City-St-Zip: TAMPA, FL 33614

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPSD (X) Change ( ) Addition  
Name: MINARDI, GLENN A  
Address: 4413 N. HESPERIDES ST.  
City-St-Zip: TAMPA, FL 33614

Title: D (X) Change ( ) Addition  
Name: MINARDI, ABRAHAM  
Address: 4413 N. HESPERIDES ST.  
City-St-Zip: TAMPA, FL 33614

Title: D ( ) Change (X) Addition  
Name: MINARDI, GLENN A JR  
Address: 4413 N. HESPERIDES ST.  
City-St-Zip: TAMPA, FL 33614

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: GLENN A. MINARDI SR

VPS

03/25/2009

Electronic Signature of Signing Officer or Director

Date