2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000069745

Entity Name: JAMMAR TRANSPORTATION INC.

FILED Jan 25, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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428 KISSIK CIRLCE 428 KASSIK CIECLE ORLANDO, FL 32824 ORLANDO, FL 32824

Current Mailing Address: New Mailing Address:

428 KISSIK CIRLCE 428 KASSIK CIRCLE ORLANDO, FL 32824 CRLANDO, FL 32824

FEI Number: 59-3679537 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:

HEATH, LINWORTH
428 KISSIK CIRLCE
ORLANDO, FL 32824 US
HEATH, LINWORTH
KASSIK CIRCLE
ORLANDO, FL 32824 US
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: 01/25/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

Title:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition

 HEATH, LINWORTH
 Name:
 HEATH, LINWORTH

 428 KISSIK CIRCE
 Address:
 428 KASSIK CIRCLE

 ORLANDO, FL 32824
 City-St-Zip:
 ORLANDO, FL 32824

 Name:
 HEATH, LINDA S
 Name:
 HEATH, LINDA S

 Address:
 428 KISSIK CIRLCE
 Address:
 428 KASSIK CIRCLE

 City-St-Zip:
 ORLANDO, FL 32824
 City-St-Zip:
 ORLANDO, FL 32824

Title: D () Delete Title: D (X) Change () Addition

 Name:
 HEATH, PARIS
 Name:
 HEATH, PARIS

 Address:
 428 KISSIK CIRLCE
 Address:
 428 KASSIK CIRCLE

 City-St-Zip:
 ORLANDO, FL 32824
 City-St-Zip:
 ORLANDO, FL 32824

Title: D () Delete Title: D (X) Change () Addition

 Name:
 HEATH, KHALI
 Name:
 HEATH, KHALI

 Address:
 428 KAKIKI CIR.
 Address:
 428 KASSIK CIRCLE

 City-St-Zip:
 ORLANDO, FL 32824
 City-St-Zip:
 ORLANDO, FL 32824

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: LINWORTH HEATH OWNE 01/25/2009