2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058176

Entity Name: CODOTRANS, INC.

Name:

Address:

City-St-Zip:

PAZ, NESTOR

MIAMI, FL 33126

1325 NW 78 AVENUE #101

FILED Jan 03, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1325 NW 78 AVENUE #104 MIAMI, FL 33126				1325 NW 78 AVENUE #101 MIAMI, FL 33126			
Current Mailing Address:				New Mailing Address:			
1325 NW 7 #104 MIAMI, FL	78 AVENUE 33126		#	1325 NW 7 #101 MIAMI, FL	78 AVENUE 33126		
FEI Number:	: 65-1114281	FEI Number Applied For ()	FEI Numb	er Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
RIVERO, MAGALY M MANAGER 1325 NW 78 AVENUE #104 MIAMI, FL 33126 US				RIVERO, MAGALY M MANAGER 1325 NW 78 AVENUE #101 MIAMI, FL 33126 US			
	named enti e of Florida.	ty submits this statement for th	e purpose of o	changing i	ts registered o	office or registered agent, or be	oth,
SIGNATURE:				01/03/2008			
	Elect	ronic Signature of Registered /	Agent -			Date	
Election Car	npaign Finan	cing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	P RODRIQUE 1325 NW 78 MIAMI, FL 3	AVENUE #104	۸ م	Fitle: Name: Address: City-St-Zip:	P (X RODRIQUEZ, N 1325 NW 78 AN MIAMI, FL 331	/ENUE #101	
Title: Name: Address: City-St-Zip:	S RIVERO, MA 1325 NW 78 MIAMI, FL	3 AVENUE #101	۸ م	Fitle: Name: Nddress: Dity-St-Zip:	()) Change ()Addition	
Title:	VPT	() Delete	Т	Title:	() Change ()Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MAGALY RIVERO S 01/03/2008