

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000084179

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: TMRS TRANSPORT SERVICES, INC.

**Current Principal Place of Business:**

7512 DR. PHILLIPS BLVD, SUITE 50-511  
ORLANDO, FL 32819

**New Principal Place of Business:**

11542 LAKE WILLIS DR  
ORLANDO, FL 32869

**Current Mailing Address:**

P.O. BOX 690338  
ORLANDO, FL 32869

**New Mailing Address:**

FEI Number: 59-3743587

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RABATA, EDNA M  
11542 LAKE WILLIS DR  
ORLANDO, FL 32869 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RABATA, EDNA M  
Address: 11542 LAKE WILLIS DR  
City-St-Zip: ORLANDO, FL 32869

Title: V ( ) Delete  
Name: RABATA, MOHAMAD K  
Address: 11542 LAKE WILLIS DR  
City-St-Zip: ORLANDO, FL 32869

Title: S ( ) Delete  
Name: KORTRIGHT, CARMEN  
Address: 10431 TARA DR  
City-St-Zip: RIVERVIEW, FL 33569

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: EDNA RABATA

P

04/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date