

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000021412

Entity Name: TRANSITAR CORP.

FILED
Mar 17, 2009
Secretary of State

Current Principal Place of Business:

600 N PINE ISLAND ROAD
STE # 401
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

600 N PINE ISLAND ROAD
STE # 401
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 41-2082730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEBOLO, DINO
600 N PINE ISLAND ROAD
STE # 401
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

GORDON, JOSEPH
600 N PINE ISLAND ROAD
STE # 401
PLANTATION, FL 33324 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: JOSEPH GORDON

03/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEBOLO, DINO
Address: 600 N PINE ISLAND ROAD
City-St-Zip: PLANTATION, FL 33324 US

Title: FD (X) Delete
Name: FALENI, MICHEL
Address: 600 N PINE ISLAND ROAD
City-St-Zip: PLANTATION, FL 33324 US

Title: VD (X) Delete
Name: GOMEZ, MANUEL
Address: 600 N PINE ISLAND ROAD
City-St-Zip: PLANTATION, FL 33324 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GORDON, JOSEPH
Address: 600 N PINE ISLAND ROAD
City-St-Zip: PLANTATION, FL 33324 US

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: JOSEPH GORDON

PD

03/17/2009

Electronic Signature of Signing Officer or Director

Date