
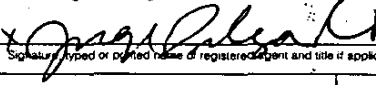



# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 17, 2006 8:00 am**  
**Secretary of State**

01-17-2006 90275 008 \*\*\*150.00

|  |  |   |   |   |  |
|--|--|---|---|---|--|
| <b>DOCUMENT # P02000051817</b><br>1. Entity Name<br><b>NANA TRANSPORTATION, INC.</b>   |  |   |   |    |  |
| Principal Place of Business<br><b>5346 NW 198TH TERR<br/>MIAMI, FL 33055</b>   |  |   | Mailing Address<br><b>5346 NW 198TH TERR<br/>MIAMI, FL 33055</b>  |   |  |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.  |  |   | 3. Mailing Address<br>Suite, Apt. #, etc.   |   |  |
| City & State   |  |   | City & State  |   |  |
| Zip  |  | Country   |   | Zip   |  |
| Country  |  | Country   |   | 4. FEI Number<br><b>75-3058315</b>  |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>  |  |   |   | Applied For<br><input type="checkbox"/> Not Applicable  |  |
| 6. Name and Address of Current Registered Agent<br><br><b>DELGADO, JORGE<br/>5346 NW 198TH TERR<br/>MIAMI, FL 33055</b>  |  |   |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <span style="float: right;"><b>FL</b></span> Zip Code |  |
| 8. 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. I am familiar with, and accept the obligations of registered agent.<br><br>SIGNATURE:  (NOTE: Registered Agent signature required when reinstating) <span style="float: right;">1/10/06 DATE</span>   |  |   |   |   |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2006 Fee will be \$550.00</b>  |  | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |   |   |  |
| <b>10. OFFICERS AND DIRECTORS</b>  |  |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <b>P</b><br><b>DELGADO, JORGE</b><br><b>5346 NW 198TH TERR</b><br><b>MIAMI, FL 33055</b>   | <input type="checkbox"/> Delete   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <b>S</b><br><b>DELGADO, XIOMARA</b><br><b>5346 NW 198TH TERR</b><br><b>MIAMI, FL 33055</b> | <input type="checkbox"/> Delete   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete  |   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete  |   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete  |   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete  |   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete  |   |   |   |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |  |   | SIGNATURE:  <span style="float: right;">1/10/06 786-457-3161</span><br><small>DATE DAYTIME PHONE #</small> |   |  |