2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2008
Secretary of State

DOCUMENT# P03000041770

Entity Name: ADVANCED QUALITY TRANSPORTATION SERVICE, INC.

Current Principal Place of Business:

4008 WHOLE SALE CT
NORTH FORT MYERS, FL 33903 US

New Principal Place of Business:

Current Mailing Address:

4008 WHOLE SALE CT
NORTH FORT MYERS, FL 33903 US

New Mailing Address:

FEI Number: 45-0510693 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LITTEN, MICHAEL E
2717 SW 11TH COURT
CAPE CORAL, FL 33914 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LITTEN, DONNA A DIRECTO
Address: 423 ELLIS STREET
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: VP ( ) Delete
Name: MARKAL, ADRIAN A
Address: 1915 N.E. 14TH TERR.
City-St-Zip: CAPE CORAL, FL 33909 US

Title: D ( ) Delete
Name: LITTEN, MAX E DIRECTO
Address: 423 ELLIS ST
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: CEOT ( ) Delete
Name: LITTEN, MICHAEL E CEO/TRE
Address: 2717 SW 11TH COURT
City-St-Zip: CAPE CORAL, FL 33914 US

Title: S ( ) Delete
Name: LITTEN, RACHAEL M SECRETE
Address: 2717 SW 11TH COURT
City-St-Zip: CAPE CORAL, FL 33914

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:

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: RACHAEL LITTEN S 05/07/2008

Electronic Signature of Signing Officer or Director Date