2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000009846

Entity Name: NIGHT SHIFT TRANSPORT, INC

FILED Apr 09, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2113 BAKER AVENUE 1801 SW 48TH AVE

HAINES, FL 33844 US WEST PARK, FL 33023 US

Current Mailing Address: New Mailing Address:

906 EAST 40TH STREET BROOKLYN, NY 11210 US

FEI Number: 20-0596786 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GREEN, MONICA

2113 BAKER AVENUE

HAINES, FL 33844 US

MCKENZIE, EUTON

1801 SW 48TH AVE

WEST PARK, FL 33023 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: EUTON MCKENZIE 04/09/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P/D (X) Change () Addition Name: GREEN, MONICA Name: MCKENZIE, EUTON

 Address:
 2113 BAKER AVE
 Address:
 1801 SW 48TH AVE

 City-St-Zip:
 HAINES, FL 33844
 City-St-Zip:
 WEST PARK, FL 33023 US

Title: () Delete Title: MGR () Change (X) Addition
Name: GREEN MONICA

 Name:
 Name:
 GREEN, MONICA

 Address:
 Address:
 1801 SW 48TH AVE

 City-St-Zip:
 City-St-Zip:
 WEST PARK, FL 33023 US

Title: () Delete Title: T () Change (X) Addition

 Name:
 Name:
 NICHOLS, REDETHA

 Address:
 Address:
 1545 EAST 53RD STREET

 City-St-Zip:
 City-St-Zip:
 BROOKLYN, NY 11234 US

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 ELLIS, MICHELLE

 Address:
 Address:
 906 EAST 40TH STREET

 City-St-Zip:
 City-St-Zip:
 BROOKLYN, NY 11210 US

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: MONICA GREEN MGR 04/09/2008