

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000050071

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** L & J LOGISTICS BROKER, INC.

**Current Principal Place of Business:**

4535 S DALE MABRY HWY  
TAMPA, FL 33611

**New Principal Place of Business:**

**Current Mailing Address:**

4535 S DALE MABRY HWY  
TAMPA, FL 33611

**New Mailing Address:**

**FEI Number:** 86-1100868

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAN MARTIN JR, JIMMY  
4535 S. DALE MABRY HWY  
TAMPA, FL 33611 US

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

SAN MARTIN JR, JIMMIE  
4535 S. DALE MABRY HWY  
TAMPA, FL 33611 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: JIMMIE SAN MARTIN JR

02/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SAN MARTIN JR, JIMMIE  
Address: 4535 S DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33611

Title: VP  
Name: SAN MARTIN, LILY  
Address: 4535 S DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33611

Title: TD  
Name: TERLIZZI, GINA  
Address: 4535 S DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33611

Title: SD  
Name: KOSTO, MICHELLE  
Address: 4535 S DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33611

I hereby 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 all other like empowered.

SIGNATURE: JIMMIE SAN MARTIN JR

PD

02/16/2011

Electronic Signature of Signing Officer or Director

Date