

**2009 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 01, 2009  
Secretary of State**

DOCUMENT# P04000082370

Entity Name: DLS TRANSPORT, INC.

**Current Principal Place of Business:**

320 HAWTHORNE HILLS PLACE APT 202  
ORLANDO, FL 32835

**New Principal Place of Business:**

**Current Mailing Address:**

320 HAWTHORNE HILLS PLACE APT 202  
ORLANDO, FL 32835

**New Mailing Address:**

FEI Number: 20-1160333      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DOUGLAS, ROBERT  
320 HAWTHORNE HILLS PL  
APT202  
ORLANDO, FL 32835 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: P ( ) Delete  
Name: ROBERT DOUGLAS  
Address: 320 HAWTHORNE HILLS PLACE APT202  
City-St-Zip: ORLANDO, FL 32835 US

Title: .. ( ) Delete  
Name: .....  
Address: .....  
City-St-Zip: ....., .. US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: ROBERT N DOUGLAS

P

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date