2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092664

Entity Name: FLA TRANSPORT INC.

FILED Apr 26, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

 10501 NW 50TH STREET
 5027 N. HIATUS ROAD

 105
 SUNRISE, FL 33351

SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

1040 CORAL RIDGE DRIVE 8742 NW 50TH DRIVE

101 CORAL SPRINGS, FL 33067 CORAL SPRINGS, FL 33071

FEI Number: 20-1286158 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:

MION, ROBERT

1040 CORAL RIDGE DRIVE

1011

MION, ROBERT

8742 NW 50TH DRIVE

CORAL SPRINGS EL 3306

101 CORAL SPRINGS, FL 33071 US CORAL SPRINGS, FL 33067 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: ROBERT MION 04/26/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

 Name:
 MION, ROBERT
 Name:
 MION, ROBERT

 Address:
 1040 CORAL RIDGE DRIVE STE. 101
 Address:
 8742 NW 50TH DRIVE

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:
 CORAL SPRINGS, FL 33067

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

 Name:
 FALK, ROBERT
 Name:
 FALK, ROBERT

 Address:
 10501 NW 50TH STREET SUITE 105
 Address:
 5027 N. HIATUS ROAD

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:
 SUNRISE, FL 33351

I hereby certify that the information supplied with this filing does not qualify for the 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 MION P 04/26/2006