2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000102312

Entity Name: ROA BROTHERS TRANSPORTATION LOGISTICS INC

FILED Mar 18, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
11801 NW 100 RD SUITE 1 MEDLEY, FL 33178 US					
Current Mailing Address:			New Mailing Address:		
13237 SW 146 ST MIAMI, FL 33186 US			PO BOX 770462 MIAMI, FL 33177 US		
FEI Number:	20-1368780	FEI Number Applied For () FEI Nur	nber Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name				Address of New Registered Agent:	
ROA, CARLOS 13237 SW 146 STREET MIAMI, FL 33186 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:					
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: AI			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ROA, CARLOS	Delete K CIRCLE NORTH FL 32207 US	Title: Name: Address: City-St-Zip:	P (X) Change () Addition ROA, CARLOS PO BOX 770462 MIAMI, FL 33177 US	
Title: Name: Address: City-St-Zip:	VPL () E RODRIGUEZ, AM 13237 SW 146 S MIAMI, FL 33186	TREET	Title: Name: Address: City-St-Zip:	VPT (X) Change () Addition ROA, SANDRA PO BOX 770462 MIAMI, FL 33177 US	
Title: Name: Address: City-St-Zip:	DOCL () E ROA, SANDRA 13237 SW 146 S MIAMI, FL 33186		Title: Name: Address: City-St-Zip:	S (X) Change () Addition ROA, KYRSTIN PO BOX 770462 MIAMI, FL 33177 US	
Title: Name: Address: City-St-Zip:	DOJL () E PACHECO, ORLA 3127 HOME PAR JACKSONVILLE,	ANDO K CIRCLE NORTH	Title: Name: Address: City-St-Zip:	DO (X) Change () Addition PACHECO, ORLANDO 3127 HOME PARK CIRCLE NORTH JACKSONVILLE, FL 32207	
Title: Name: Address: City-St-Zip:	PRST () E ROA, KYRSTIN 13237 SW 146 S MIAMI, FL 33186		Title: Name: Address: City-St-Zip:	D (X) Change () Addition RODRIGUEZ, ANDRES PO BOX 770462 MIAMI, FL 33177	
Title: Name: Address: City-St-Zip:	() [Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition VALENZIANO, ANTONIO PO BOX 770462 MIAMI, FL 33177	

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: CARLOS ROA P 03/18/2008