2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000102312

FILED Mar 24, 2008 Secretary of State

Entity Name: ROA BROTHERS TRANSPORTATION LOGISTICS INC

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:** PO BOX 770462 MIAMI, FL 33177 US FEI Number: 20-1368780 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: ROA, CARLOS 13237 SW 146 STREET MIAMI, FL 33186 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ROA, CARLOS ROA, CARLOS Name: Name: PO BOX 770462 PO BOX 770462 Address: Address: City-St-Zip: MIAMI, FL 33177 US City-St-Zip: MIAMI, FL 33177 US Title: VPT Title: () Delete (X) Change () Addition ROA, SANDRA Name: Name: ROA. SANDRA PO BOX 770462 PO BOX 770462 Address: Address: MIAMI, FL 33177 US MIAMI, FL 33177 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition ROA, KYRSTIN Name: Name: PO BOX 770462 Address: Address: City-St-Zip: MIAMI, FL 33177 US City-St-Zip: Title: DO () Delete Title: () Change () Addition PACHECO, ORLANDO Name: Name: Address: 3127 HOME PARK CIRCLE NORTH Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: Title: VP D (X) Change () Addition () Delete RODRIGUEZ, ANDRES RODRIGUEZ, ANDRES Name: Name: PO BOX 770462 Address: PO BOX 770462 Address: City-St-Zip: MIAMI, FL 33177 City-St-Zip: MIAMI, FL 33177 Title: () Delete Title: **VPDT** (X) Change () Addition VALENZIANO, ANTONIO Name: Name: VALENZIANO, ANTONIO PO BOX 770462 Address: Address: PO BOX 770462 City-St-Zip: MIAMI, FL 33177 City-St-Zip: 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: SANDRA ROA VP 03/24/2008