2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000102312

Entity Name: ROA BROTHERS TRANSPORTATION LOGISTICS INC

FILED Jul 17, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3127 HOME PARK CIRCLE NORTH JACKSONVILLE, FL 32207 US

Current Mailing Address: New Mailing Address:

3127 HOME PARK CIRCLE NORTH PO BOX 770462
JACKSONVILLE, FL 32207 US MIAMI, FL 33177 US

FEI Number: 26-0477339 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:

RODRIGUEZ, ANDRES

3127 HOME PARK CIRCLE NORTH

JACKSONVILLE, FL 32207 US

ROA, KYRSTIN

13237 SW 146 ST

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: KYRSTIN ROA 07/17/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 RODRIGUEZ, ANDRES
 Name:
 ROA, KYRSTIN

 Address:
 3127 HOME PARK CIRCLE NORTH
 Address:
 PO BOX 770462

 City-St-Zip:
 JACKSONVILLE, FL 32207 US
 City-St-Zip:
 MIAMI, FL 33177 US

Title: VPDT () Delete Title: T (X) Change () Addition Name: VALENZIANO, ANTONIO Name: ROA, SANDRA

 Name:
 VALENZIANO, ANTONIO
 Name:
 ROA, SANDRA

 Address:
 22102 SW 95 PL
 Address:
 PO BOX 770462

 City-St-Zip:
 MIAMI, FL 33190 US
 City-St-Zip:
 MIAMI, FL 33177 US

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

 Name:
 Name:
 ROA, CARLOS

 Address:
 Address:
 PO BOX 770462

 City-St-Zip:
 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: CARLOS ROA D 07/17/2009