## 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## DOCUMENT # P04000127780

1. Entity Name

TWINS TRANSPORTATION GROUP, INC.



FILED May 19, 2008 08:00 AN Secretary of State

				4,444						
Principal Plac	e of Business	Mailing Address	Mailing Address							
1285 HILL A	VENUE	1285 HILL AVENUE	1285 HILL AVENUE							
SUITE # 7		SUITE # 7				JISANI III NNIIS NINK JOSSI ANII	AND HER IS			
WEST PALM	M BEACH FL 33407	WEST PALM BEAC	H FL 33407	,						
2. Principal F	Place of Business - No P.O. Box	# 3. Mailing Address	3. Mailing Address				#BIBI 11818  1011 H	88H 1888I IBIII	BB  SS     (68)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			1st MOORE CR2E034 (10/07)				
City & State		City & State	City & State		4. FEI Numb	77-0646162			Applied For Not Applicable	
Zıp	Country	Zip	Count	try	- 5. Certificate	e of Status Desired		<b>\$8.75</b> A Fee R <i>e</i> qui		
6. Name and Address of Current Registered Agent					7. Name and	7. Name and Address of New Registered Agent				
				Name						
128	ERVA, DANIEL A 5 HILL AVENUE			Street Address (P.O. Box Number is Not Acceptable)						
SUITE # 7 WEST PALM BEACH FL 33407							· · ·			
				City FL Zip Code						
	named entity submits this state ions of registered agent.	ment for the purpose of changing	j its registere	ed office or reg	gistered agent, or bo	oth, in the State of Flo	orida. Fam fi	amiliar witi	h, and accept	
SIGNATURE	Signature, typed or chared hence of register	red poert and the flambication	NOTE Registrate	Apert supplue of	gureo wher rensible g)		DATE			
Practice of City		<del> </del>	TOTE TUGOT TO	, rigor ( c yp a 12 · · ·	deres es es estad.					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State						9. Election Campa Trust Fund Con	•		5.00 May Be Ided to Fees	
10.	OFFICER	S AND DIRECTORS	11.		ADDITIONS	/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 11	
TITLE	P.VP	☐ De¹ete	TITLE					☐ Change	Addition	
NAME	MINERVA, DANIEL A 84		NAME							
STREET ADDRESS				EL ADDRESS		<u> </u>				
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TITLE	T,S	☐ De∗ete	TITLE					Change	e 🔲 Addition	
NAME	MINERVA, FRANK A		NAME							
STREET ADDRESS CITY-ST-ZIP	1			ET ADDRESS	•					
	WEST PALM BEACH FL 334		<del></del> }	ST-ZIP						
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STREET ADDRESS CITY+ST+ZIP				T ADDRESS						
CITY-ST-ZIP  12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that										
12. j nareby (	certify that the information suppl	lied with this filing does not quali	ity for the ex-	emptions conf	tained in Section 11	<ol> <li>Florida Statutes I</li> </ol>	turther certi	ity that the	: information	

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal offect 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 in Block 10 or Block 11 if changed, or on an altachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P 381-718-62JY

Day: nie Phon