

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000105433

FILED
Jul 08, 2008
Secretary of State

Entity Name: KESAB TRANSFER & RELOCATION INC.

Current Principal Place of Business:

1299 NW 170 AVE
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

Current Mailing Address:

1299 NW 170 AVE
PEMBROKE PINES, FL 33028 US

New Mailing Address:

FEI Number: 76-0798409 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDRADE, JOHNY
1299 N.W. 170 AVE.
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

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

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:

Title: DP () Delete
Name: MORALES, SERGIO
Address: 1299 NW 170 AVE
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: DVP () Delete
Name: ANDRADE, JOHNY
Address: 17017 NW 11 ST
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: S () Delete
Name: ANDRADE, ANA
Address: 17017 N.W. 11 ST
City-St-Zip: PEMBROKE PINES, FL 33028

Title: T () Delete
Name: CASTRO, ALEXANDRA
Address: 17017 N.W. 11ST
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHNY ANDRADE

DVP

07/08/2008

Electronic Signature of Signing Officer or Director

Date