2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2006 8:00 am Secretary of State 04-24-2006 90447 010 ***150.00

DOCUMENT # P05000114549 1. Entity Name TIA TATA TRANSPORT CORP							04-24-2006	90447 0	10 ***1:	50.00	
Principal Place of Business 13963 SW 55TH ST. MIAMI, FL 33175			13963 SW	Mailing Address 13963 SW 55TH ST. MIAMI, FL 33175					อ	nnto	บบง
2. Principal Place of Business			3. Mailing Ad	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.			01252006	Chg-P	CR2E03	4 (11/05)		
City & State		City & Stat	City & State			4. FEI Number	332758	9	_ 	plied For t Applicable	
Zip	Zip Country		Zip		Counti	ry	5. Certificate of	Status Desired		8.75 Add ee Required	
6. Name and Address of Current Registered Agent						A1	7. Name and A	ddress of New Re	gistered Aç	gent	
SANCHEZ, JOSE A 13963 SW 55TH ST. MIAMI, FL. 33175						Name Street Address (P.O. Box Number is Not Acceptable)					
·					ļ	City			FL	Zip Code	e .
	named entitions of regist	y submits this statement tered agent.	t for the purpose of	changing its re	egistere	d office or register	ed agent, or both,	in the State of Flor		miliar with,	and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution							00 May Be ed to Fees		-		
10.		OFFICERS AN									
TITLE NAME	PD		 		11.		ADDITIONS/CH	HANGES TO OFFI			
STREET ADDRESS	13963 SV	Z, JOSE A V 55TH ST.	 	☐ Delete	TITLE NAME STREE	ET ADDRESS	ADDITIONS/CH	HANGES TO OFFI		DIRECTORS Change	S IN 11
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16. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 fusite 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 attachment with anyaddress, with all other like empowered.

SIGNATURE:

ED NAME OF SIGNING OFFICER OR DIRECTOR

16 A SANCHEZ-PLES 01/25/06 (786)