

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128203

Entity Name: TRAM DUTY FREE INC.

FILED
Feb 27, 2009
Secretary of State

Current Principal Place of Business:

9990 NW 14 ST STE 101 & 102
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

221 CHERIDAN BLVD
INWOOD, NY 11096

New Mailing Address:

221 SHERIDAN BLVD
INWOOD, NY 11096

FEI Number: 20-3486238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUARNACCIA, ROBERT
1186 MAHOGANY LN
FORT LAUDERDALE, FL 33327 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GUARNACCIA, ROBERT
Address: 1186 MAHONGANY LN
City-St-Zip: FORT LAUDERDALE, FL 33327

Title: VPD () Delete
Name: BEATTIE, ANN MARIE
Address: 175 MAPLE AVE 4A
City-St-Zip: WESTBURY, NY 11590

Title: SD (X) Delete
Name: STEIN, MICHAEL
Address: 2 FORTH RD
City-St-Zip: VALLEY STREAM, NY 11581

Title: TD () Delete
Name: STAUB, THOMAS
Address: 72 CURLEU ST
City-St-Zip: LONG BEACH, NY 11561

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: ROBERT GUARNACCIA

PRES

02/27/2009

Electronic Signature of Signing Officer or Director

Date