

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144843

FILED
Jul 10, 2006
Secretary of State

Entity Name: DARRISSI TRANSPORT, INC.

Current Principal Place of Business:

2300 TWELVE OAKS DRIVE
F1
ORANGE PARK, FL 32065 US

New Principal Place of Business:

Current Mailing Address:

2300 TWELVE OAKS DRIVE
F1
ORANGE PARK, FL 32065 US

New Mailing Address:

FEI Number: 20-3684983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNER, STEVEN W
1106 PARK AVENUE
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

DARRISSI, PASQUALE
2300 TWELVE OAKS DR.
APT.# F1
ORANGE PARK, FL 32065 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: PASQUALE DARRISSI

07/10/2006

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: P () Delete
Name: DARRISSI, PASQUALE
Address: 2300 TWELVE OAKS DRIVE F1
City-St-Zip: ORANGE PARK, FL 32065 US

Title: VP () Delete
Name: DARRISSI, ANGELINA
Address: 2300 TWELVE OAKS DRIVE F1
City-St-Zip: ORANGE PARK, FL 32065 US

Title: S () Delete
Name: DARRISSI, PASQUALE
Address: 2300 TWELVE OAKS DRIVE F1
City-St-Zip: ORANGE PARK, FL 32065 US

Title: T () Delete
Name: DARRISSI, ANGELINA
Address: 2300 TWELVE OAKS DRIVE F1
City-St-Zip: ORANGE PARK, FL 32065 US

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 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: PASQUALE DARRISSI

P

07/10/2006

Electronic Signature of Signing Officer or Director

Date