

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000160270

**FILED**  
**Jan 12, 2009**  
**Secretary of State**

**Entity Name:** SOUTHERN CARRIER GROUP CORP.

**Current Principal Place of Business:**

14834 SW 42 CT  
MIRAMAR, FL 33025

**New Principal Place of Business:**

14834 SW 42 CT  
MIRAMAR, FL 33027

**Current Mailing Address:**

14834 SW 42 CT  
MIRAMAR, FL 33025

**New Mailing Address:**

14834 SW 42 CT  
MIRAMAR, FL 33027

**FEI Number:** 20-3900543

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HECHAVARRIA, MARIA E  
14834 SW 42 CT  
MIRAMAR, FL 33025 US

**Name and Address of New Registered Agent:**

HECHAVARRIA, MARIA E  
14834 SW 42 CT  
MIRAMAR, FL 33027 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:** MARIA HECHAVARRIA

01/12/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** HECHAVARRIA, MARIA E  
**Address:** 14834 SW 42 CT  
**City-St-Zip:** MIRAMAR, FL 33025

**Title:** VP ( ) Delete  
**Name:** HECHAVARRIA, CARLOS  
**Address:** 14834 SW 42 CT  
**City-St-Zip:** MIRAMAR, FL 33025

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** P (X) Change ( ) Addition  
**Name:** HECHAVARRIA, MARIA E  
**Address:** 14834 SW 42 CT  
**City-St-Zip:** MIRAMAR, FL 33027

**Title:** VP (X) Change ( ) Addition  
**Name:** HECHAVARRIA, CARLOS  
**Address:** 14834 SW 42 CT  
**City-St-Zip:** MIRAMAR, FL 33027

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:** CARLOS HECHAVARRIA

MR

01/12/2009

Electronic Signature of Signing Officer or Director

Date