## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000166375

Entity Name: SJ&VTRANSPORTATION, INC.

**FILED** Apr 26, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

11115 W OKEECHOBEE RD 18148 NW 89 PL HIALEAH, FL 33018 139

HIALEAH GARDENS, FL 33018

**New Mailing Address: Current Mailing Address:** 

11115 W OKEECHOBEE RD 18148 NW 89 PL HIALEAH, FL 33018

HIALEAH GARDENS, FL 33018

FEI Number: 84-1697914 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ESPASANDIN, GUADALUPE ESPASANDIN, GUADALUPE 18148 NW 89 PL 11115 W OKEECHOBEE RD 139 HIALEAH, FL 33018 US

HIALEAH GARDENS, FL 33018 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: GUADALUPE ESPASANDIN

04/26/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete Title: PTSD (X) Change ( ) Addition ESPASANDIN, GUADALUPE ESPASANDIN, GUADALUPE Name: Name:

11115 W OKEECHOBEE RD UNIT 139 18148 NW 89 PL Address: Address: City-St-Zip: HIALEAH GARDENS, FL 33018 City-St-Zip: HIALEAH, FL 33018

Title: VΡ (X) Delete Title: () Change () Addition

ESPASANDIN, IVAN Name: Name: 11115 W OKEECHOBEE RD UNIT 139 Address: Address: HIALEAH GARDENS, FL 33018 City-St-Zip: 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: GUADALUPE ESPASANDIN **PTSD** 04/26/2009