

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED  
Jan 05, 2012  
Secretary of State

Entity Name: MAGELLAN TRANSPORT LOGISTICS, INC.

**Current Principal Place of Business:**

2511 ST. JOHNS BLUFF RD. S.  
107  
JACKSONVILLE, FL 32246 US

**New Principal Place of Business:**

**Current Mailing Address:**

2511 ST. JOHNS BLUFF RD. S.  
107  
JACKSONVILLE, FL 32246 US

**New Mailing Address:**

FEI Number: 20-4392995      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PIATAK, TOM  
2511 ST. JOHNS BLUFF RD. S.  
107  
JACKSONVILLE, FL 32246 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

**OFFICERS AND DIRECTORS:**

Title: C  
Name: PIATAK, TOM  
Address: 2511 ST. JOHNS BLUFF RD. S. #107  
City-St-Zip: JACKSONVILLE, FL 32246

Title: CEO  
Name: PIATAK, TOM  
Address: 2511 ST. JOHNS BLUFF RD. S. #107  
City-St-Zip: JACKSONVILLE, FL 32246

Title: P  
Name: LUCIANO, MITCH  
Address: 2511 ST. JOHNS BLUFF RD. S. #107  
City-St-Zip: JACKSONVILLE, FL 32246

Title: COO  
Name: LUCIANO, MITCH  
Address: 2511 ST. JOHNS BLUFF RD. S. #107  
City-St-Zip: JACKSONVILLE, FL 32246

I hereby 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 all other like empowered.

SIGNATURE: MITCHELL LUCIANO

MR.

01/05/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date