## FILED May 15, 2008 08:00 AN Secretary of State

## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P06000016892 BONÁNZA TRANSPORT OF MIAMI, CORP. Principal Place of Business Mailing Address 11013 NW 30TH ST., #105 11013 NW 30TH ST., #105 DORAL, FL 33172 DORAL, FL 33172 CR2E034 (11/05) 05122008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-4263347 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE TALAVERA, ULISES 11013 NW 30TH ST., #105 DORAL, FL 33172 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 corporation did not receive the prior notice. Trust Fund Contribution Added to Fees Due by September 12, 2008 10. OFFICERS AND DIRECTORS TITLE **PVTS** TALAVERA, ULISES NAME STREET ADDRESS 11013 NW 30TH ST., #105 000000951903 06/04/08-80058-004 150.00 CITY-ST-ZIP DORAL, FL 33172 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

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Daytime Phone #