2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P06000046685

Entity Name: L.E.M. TRANSPORT INC

Current Principal Place of Business:

15754 SW 300 TER
HOMESTEAD, FL 33033

New Principal Place of Business:

Current Mailing Address:

15754 SW 300 TER
HOMESTEAD, FL 33033

New Mailing Address:

FEI Number: 11-3774826 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOTO, MAJELA
15754 SW 300 TER
HOMESTEAD, FL 33033 US

Name and Address of New Registered Agent:

SOTO, LIBNA
15754 SW 300 TER
HOMESTEAD, FL 33033 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: LIBNA SOTO 04/30/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SOTO, MAJELA
Address: 15754 SW 300 TER
City-St-Zip: HOMESTEAD, FL 33033

Title: VP ( ) Delete
Name: SOTO, LIBNA L
Address: 15754 SW 300 TER
City-St-Zip: HOMESTEAD, FL 33033 US

Title: SD (X) Delete
Name: SOTO, GISELL
Address: 15754 SW 300 TER
City-St-Zip: HOMESTEAD, FL 33033 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SOTO, LIBNA L
Address: 15754 SW 300 TER
City-St-Zip: HOMESTEAD, FL 33033

Title: VP (X) Change ( ) Addition
Name: SOTO, GISELL C
Address: 15754 SW 300 TER
City-St-Zip: HOMESTEAD, FL 33033 US

Title: ( ) Change ( ) Addition
Name:
Address:
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: LIBNA SOTO PD 04/30/2008
Electronic Signature of Signing Officer or Director Date