2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000082595

Entity Name: FX TRANSPORT, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
11886 NW 24TH STREET CORAL SPRINGS, FL 33065			
Current Mailing Address:		New Mailing Address:	
11886 NW 24TH STREET CORAL SPRINGS, FL 33065			
FEI Number:	13-3533995 FEI Number Applied For () FEI Num	mber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
FIGUEROA, FELIX A 11886 NW 24TH STREET CORAL SPRINGS, FL 33065 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:			
	Electronic Signature of Registered Agent		Date
Election Campaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	MR () Delete FIGUEROA, FELIX A OFFICER 11886 NW 24TH STREET CORAL SPRINGS, FL 33065	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MR. () Delete SANDEZ, MISLAY OFFICER 11886 NW 24TH ST. CORAL SPRINGS, FL 33065	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MR. () Delete SANTANILLA, ALEXIS OFFICER 11886 NW 24TH ST. CORAL SPRINGS, FL 33065	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MR. () Delete SANCHEZ, GERMAN OFFICER 11886 NW 24TH ST. CORAL SPRINGS, FL 33065	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	.MR () Delete CRESPO, LUIS A OFFICER 11886 NW 24TH ST. CORAL SPRINGS, FL 33065	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MR () Delete SANTANILLA, JUAN P OFFICER 11886 NW 24 ST CORAL SPRINGS, FL 33065	Title: Name: Address: City-St-Zip:	() Change () Addition
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: FELIX A. FIGUEROA MR. 04/21/2009