

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000155738

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: TAURUS INTERNATIONAL LOGISTICS, INC.

**Current Principal Place of Business:**

1560 SAWGRASS CORPORATE PARKWAY  
4TH FLOOR  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

1560 SAWGRASS CORPORATE PARKWAY  
4TH FLOOR  
SUNRISE, FL 33323

**New Mailing Address:**

FEI Number: 20-8186158      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SCHIMMEL, ROBERT L  
3191 CORAL WAY, PH-2  
MIAMI, FL 33145 US

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

BUITANO, HECTOR  
1560 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FL 33323 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: HECTOR BUITANO      04/27/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: BUITANO, HECTOR JR.  
Address: 1560 SAWGRASS CORPORATE PARKWAY, 4TH FLOOR  
City-St-Zip: SUNRISE, FL 33323

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: HECTOR BUITANO      P      04/27/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date