

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000009827

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: PR LADY TRANSPORTATION INC.

**Current Principal Place of Business:**

3145 SOUTH 7TH STREET  
FORT PIERCE, FL 34982

**New Principal Place of Business:**

**Current Mailing Address:**

3145 SOUTH 7TH STREET  
FORT PIERCE, FL 34982

**New Mailing Address:**

FEI Number: 20-8228753      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SANTIAGO, PAMELA  
3145 SOUTH 7TH STREET  
FORT PIERCE, FL 34982      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: SANTIAGO, PAMELA  
Address: 3145 SOUTH 7TH STREET  
City-St-Zip: FORT PIERCE, FL 34982

Title: S ( ) Delete  
Name: SANTIAGO, PAMELA  
Address: 3145 SOUTH 7TH STREET  
City-St-Zip: FORT PIERCE, FL 34982

Title: VP/D ( ) Delete  
Name: BROWN, MICHELLE  
Address: 5491 NW EVANSTON AVE  
City-St-Zip: PORT LUCIE, FL 34984

Title: T ( ) Delete  
Name: BROWN, MICHELLE  
Address: 5491 NW EVANSTON AVE  
City-St-Zip: PORT LUCIE, FL 34984

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PAMELA SANTIAGO

P/D

04/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date