

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000026495

Entity Name: TRANZ SUPPLIERS, INC.

FILED
Jan 20, 2009
Secretary of State

Current Principal Place of Business:

1912 SAWFISH DR.
KISSIMEE, FL 34759

New Principal Place of Business:

Current Mailing Address:

1912 SAWFISH DR.
KISSIMEE, FL 34759

New Mailing Address:

FEI Number: 20-8529489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOPEZ, CECILIA
9166 W. ATLANTIC BLVD.
1614
CORAL SPRINGS, FL 33071 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 () Delete
Name: SHIVDARSAN, MAHEN
Address: 1912 SAWFISH DRIVE
City-St-Zip: KISSIMEE, FL 34759

Title: VP () Delete
Name: SANTOS, DJALLMA NILTON
Address: 183 NW 75 TH TERRACE
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MAHEN SHIVDARSAN

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date