2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000064277

Entity Name: CROSS BAY TRUCKING, INC.

FILED Apr 26, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1907 SW AGUERO STREET 2289 SW SAVAGE BLVD PORT SAINT LUCIE, FL 34953 PORT SAINT LUCIE, FL 34953

Current Mailing Address: New Mailing Address:

1907 SW AGUERO STREET 2289 SW SAVAGE BLVD PORT SAINT LUCIE, FL 34953 PORT SAINT LUCIE, FL 34953

FEI Number: 26-0282622 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ALI, RUSSELL C
1907 SW AGUERO STREET
2289 SW SAVAGE BLVD
PORT SAINT LUCIE, FL 34953 US
289 SW SAVAGE BLVD
PORT SAINT LUCIE, FL 34953 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: 04/26/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: ALI, RUSSELL C Name: ALI, RUSSELL C

Address: 1907 SW AGUERO STREET Address: 2289 SW SAVAGE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34953
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VP () Delete Title: VP (X) Change () Addition Name: ARRISICATO, GIUSEPPE Name: ARRISICATO, GIUSEPPE

Name:ARRISICATO, GIUSEPPEName:ARRISICATO, GIUSEPPEAddress:1907 SW AGUERO STREETAddress:1052 SW CANARY TERCity-St-Zip:PORT SAINT LUCIE, FL 34953City-St-Zip:PORT SAINT LUCIE, FL 34953

Title: TRES () Delete Title: TRES (X) Change () Addition

 Name:
 ALI, EMANUELA
 Name:
 ALI, EMANUELA

 Address:
 1907 SW AGUERO STREET
 Address:
 2289 SW SAVAGE BLVD

 City-St-Zip:
 PORT SAINT LUCIE, FL 34953
 City-St-Zip:
 PORT SAINT LUCIE, FL 34953

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: RUSSELL C ALI PRE 04/26/2009