

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000006115

FILED
May 01, 2009
Secretary of State

Entity Name: QLS TRANSPORTATION CORP.

Current Principal Place of Business:

2114 N. FLAMINGO RD
1115
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

2349 NW 139TH AVE
SUNRISE, FL 33323

New Mailing Address:

2349 NW 139TH AVE
SUNRISE, FL 33323

FEI Number: 26-1763691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESCOBAR, HERNAN F
2349 NW 139TH AVE
SUNRISE, FL 33323 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ESCOBAR, HERNAN
Address: 2349 NW 139TH AVE
City-St-Zip: SUNRISE, FL 33323

Title: VP () Delete
Name: DEL RIO, KARINA
Address: 2114 N. FLAMINGO RD.
City-St-Zip: PEMBROKE PINES, FL 33323

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ESCOBAR, HERNAN
Address: 2349 NW 139TH AVE
City-St-Zip: SUNRISE, FL 33323 US

Title: VP (X) Change () Addition
Name: DEL RIO, KARINA
Address: 2114 N. FLAMINGO RD.
City-St-Zip: PEMBROKE PINES, FL 33323 US

Title: VP () Change (X) Addition
Name: DEL RIO, GUILLERMO
Address: 2349 NW 139TH AVE
City-St-Zip: SUNRISE, FL 33323 US

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: HERNAN ESCOBAR

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date