

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000018976

Entity Name: EXPEDITED SOLUTIONS, INC.

FILED
May 27, 2009
Secretary of State

Current Principal Place of Business:

22280 SW 125 AVE
MIAMI, FL 33170

New Principal Place of Business:

5767 SW 60 ST
MIAMI, FL 33143

Current Mailing Address:

22280 SW 125 AVE
MIAMI, FL 33170

New Mailing Address:

5767 SW 60 ST
MIAMI, FL 33143

FEI Number: 45-0589020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIEVES, YAMILET
22280 SW 125 AVE
MIAMI, FL 33170 US

Name and Address of New Registered Agent:

NIEVES, YAMILET
5767 SW 60 ST
MIAMI, FL 33143 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:

05/27/2009

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: NIEVES, YAMILET
Address: 22280 SW 125 AVE
City-St-Zip: MIAMI, FL 33170

Title: VP () Delete
Name: NIEVES, YAMILET
Address: 22280 SW 125 AVE
City-St-Zip: MIAMI, FL 33170

Title: S () Delete
Name: NIEVES, YAMILET
Address: 22280 SW 125 AVE
City-St-Zip: MIAMI, FL 33170 MD

Title: T () Delete
Name: NIEVES, YAMILET
Address: 22280 SW 125 AVE
City-St-Zip: MIAMI, FL 33170 MD

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NIEVES, YAMILET
Address: 5767 SW 60 ST
City-St-Zip: MIAMI, FL 33143

Title: VP (X) Change () Addition
Name: NIEVES, YAMILET
Address: 5767 SW 60 ST
City-St-Zip: MIAMI, FL 33143

Title: S (X) Change () Addition
Name: NIEVES, YAMILET
Address: 5767 SW 60 ST
City-St-Zip: MIAMI, FL 33143 MD

Title: T (X) Change () Addition
Name: NIEVES, YAMILET
Address: 5767 SW 60 ST
City-St-Zip: MIAMI, FL 33143 MD

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: YAMILET NIEVES

P

05/27/2009

Electronic Signature of Signing Officer or Director

Date