

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000074735

FILED
Apr 17, 2009
Secretary of State

Entity Name: SISTERS TOWING & TRANSPORTATION, INC.

Current Principal Place of Business:

6907 SOUTHERN BOULEVARD
C
WEST PALM BEACH, FL 33413

New Principal Place of Business:

Current Mailing Address:

6907 SOUTHERN BOULEVARD
C
WEST PALM BEACH, FL 33413

New Mailing Address:

FEI Number: 65-0462336 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, ELEANOR
6907 SOUTHERN BLVD
SUITE "O"
WEST PALM BEACH, FL 33413 US

Name and Address of New Registered Agent:

JONES, ELEANOR
6907 SOUTHERN BLVD
SUITE
WEST PALM BEACH, FL 33413 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: _____ 04/17/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JONES, ELEANOR
Address: 8587 THOUSAND PINE COURT
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VP () Delete
Name: BROCHARD, LEILANI
Address: 4710 HUNTING TRAIL
City-St-Zip: LAKE WORTH, FL 33467

Title: S () Delete
Name: DAY, MAUREEN
Address: 354 WESTWOOD CIR. W.
City-St-Zip: WEST PALM BEACH, FL 33411

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:

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: MARY L CONTESSA CPA 04/17/2009
Electronic Signature of Signing Officer or Director Date