## 2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P97000022425 1. Entity Name TRANSPORT TECHNOLOGY, INC. Principal Place of Business 6830 POLEY CREEK DRIVE EAST LAKELAND, FL 33811 DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent

## FILED Jan 25, 2008 08:00 A Secretary of State

Alternative Control			and a				
	The state of the s	The state of the s		01222008	No Chg-P	CR2E034 (11	/05)
D	O NOT WRITE II	N THIS SPAC	SE WAR	4. FEI Numbe			Applied For Not Applicable
					of Status Desired	□ \$8.75 Fee Re	Additional
6. Name and Address of Current Registered Agent							Carry on the stage of
BEDFORD, HARRY S III 6830 POLEY CREEK DRIVE EAST LAKELAND, FL 33811			DO NOT WRITE IN THIS SPACE				
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE_	Signature, typed or printed name of registered agent and title	Hamplookia (AVIII)	d Agent signature requi	ired when reinstation)*	Contraction	DATE	
	Signature, typed or printed name of registered agent and title	ir appicable. (NOTE: Registered	Agent signature requi	red when reinstating)	Sign of the same	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00		5.00 May Be dded to Fees		·		
10.	OFFICERS AND DIREC	CTORS		de Tomography of		TABLE CO.	A SHEAR SHOW SH
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS BEDFORD, HARRY S III 6830 POLEY CREEK DRIVE EAST LAKELAND, FL 33811						
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TITLE NAME STREET ADORESS CITY-ST-ZIP				IN	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-21P							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			المراقب المرا				
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attaction of the receiver of the corporation of the receiver of trustee empowered.							

SIGNATURE:

PRESIDENT GRAPHINTED NAME OF SIGNING OFFICER OR DIRECTOR

123 2008

Daytime Phone #