2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000003653

City-St-Zip:

Entity Name: TRANSPORTES ZULETA, INC.

FILED Mar 12, 2009 Secretary of State

| Current P | rincipal Plac | e of Business: | New Princ | New Principal Place of Business: | | | | |
|---|---|---------------------------------|---|---|------------|---------------------|------------|--|
| 844 W FLA MIAMI, FL | AGLER ST 33130 US | | | | | | | |
| Current M | lailing Addre | ss: | New Maili | New Mailing Address: | | | | |
| 844 W FLA MIAMI, FL | AGLER ST 33130 US | | | | | | | |
| FEI Number | : 65-0886744 | FEI Number Applied For () | FEI Number Not App | icable () | Certific | ate of Status Desir | ed () | |
| Name and | Address of | Current Registered Agent: | Name and | Name and Address of New Registered Agent: | | | | |
| D-318 | RAMON ' 3RD STREE' KE PINES, FL | | | | | | | |
| | named entity e of Florida. | submits this statement for the | purpose of changing i | ts registered | office or | registered agent | , or both, | |
| SIGNATUI | RE: | | | | | | | |
| | Electro | nic Signature of Registered A | gent | | | Date | | |
| Election Car | mpaign Financin | ng Trust Fund Contribution (). | | | | | | |
| OFFICER | S AND DIREC | CTORS: | ADDITION | IS/CHANGE | S TO OF | FICERS AND D | IRECTORS | |
| Title: Name: Address: City-St-Zip: | PD (MORALES, JA 745 SW 21 RE MIAMI, FL 33 |) | Title: Name: Address: City-St-Zip: | | () Change | () Addition | | |
| Title: Name: Address: City-St-Zip: | , | | Title: Name: Address: City-St-Zip: | | ()Change | () Addition | | |
| Title: Name: Address: | (|) Delete | Title: Name: Address: | TD MORALES, 0 745 SW 21R | ARMEN L | (X) Addition | | |

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.

City-St-Zip:

MIAMI, FL 33129

SIGNATURE: JACQUELINE MORALES PRES 03/12/2009