

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000039703

**FILED**  
**Mar 10, 2010**  
**Secretary of State**

**Entity Name:** TRANS STATE DELIVERY INC.

**Current Principal Place of Business:**

605 ABACO COURT  
KISSIMMEE, FL 34746

**New Principal Place of Business:**

1300 SEASONS BLVD  
KISSIMMEE, FL 34746

**Current Mailing Address:**

P.O. BOX 420642  
KISSIMMEE, FL 347420642

**New Mailing Address:**

P.O. BOX 420986  
KISSIMMEE, FL 34742

**FEI Number:** 59-3597281

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANSARI, HASSAN Z  
605 ABACO COURT  
KISSIMMEE, FL 34746 US

**Name and Address of New Registered Agent:**

KHAN, FAHAD A  
1300 SEASONS BLVD  
KISSIMMEE, FL 34746 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:** FAHAD A. KHAN

03/10/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** KHAN, FAHAD A  
**Address:** 1300 SEASONS BLVD.  
**City-St-Zip:** KISSIMMEE, FL 34746

I hereby 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 all other like empowered.

**SIGNATURE:** FAHAD A. KHAN

D

03/10/2010

Electronic Signature of Signing Officer or Director

Date