2008 FOR PROFIT CORPORATION. **ANNUAL REPORT**

DOCUMENT # P99000082679

1. Entity Name

MEGATRANZ TRANSPORTS, INC.



Principal Place of Business

1221 BRICKELL AVENUE

9TH FLOOR MIAMI, FL 33131 Mailing Address

1221 BRICKELL AVENUE

9TH FLOOR MIAMI, FL 33131

FILED Jul 14, 2008 08:00 AM Secretary of State



07102008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0950624 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Tours of Agent 6. Name and Address of Current Registered Agent

ZUPPARDO, HENRIQUE 1221 BRICKELL AVENUE DO NOT WRITE

9TH FLOC MIAMI, FL				IN	THIS SPACE	
	named entity submits this statement for the tions of registered agent.	e purpose of changing its regi	stered office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE Registered				d Agent signature required when reinstating) DATE		
	LE NOW!!! FEE IS \$150.00 ue by September 12, 2008	Election Campaign F Trust Fund Contribut		\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10.	OFFICERS AND DIRECTORS		Sign mind of the	adon a della	Pale Cart Part Late Late and Cart Control	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD ZUPPARDO, HENRIQUE 781 CRANDON BLVD #205 KEY BISCAYNE, FL 33149		the state of			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE				TIN:	THIS SPACE	

12. I hereby certify that the information supplied with this filing 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 attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> HOURIQUE ZUPPARDO NING OFFICER OR DIRECTOR