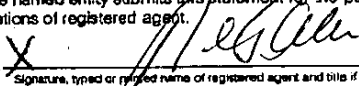
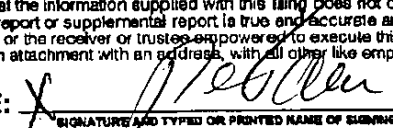


FILED
Mar 13, 2008 8:00 am
Secretary of State

03-13-2008 90042 005 ***150.00

**2008 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P99000091869 1. Entity Name TATE TRANSPORT CORPORATION			
Principal Place of Business 6570 GRIFFIN RD., SUITE 102 DAVIE, FL 33314		Mailing Address 6570 GRIFFIN RD., SUITE 102 DAVIE, FL 33314	
2. Principal Place of Business - No P.O. Box # 2830 W State Rd 84		3. Mailing Address 2830 W State Rd 84	
Suite, Apt. #, etc. 102		Suite, Apt. #, etc. 102	
City & State Ft. Lauderdale, FL		City & State Ft. Lauderdale, FL	
Zip 33312		Zip 33312	
Country USA		Country USA	
4. FEI Number 65-0954542		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TATE, R C 6570 GRIFFIN ROAD #102 DAVIE, FL 33314		7. Name and Address of New Registered Agent Name Tate, R C Street Address (P.O. Box Number is Not Acceptable) 2830 W State Rd 84 # 102 City Ft. Lauderdale FL Zip Code 33312	
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 		DATE 3.3.08	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE	
FILE NOW! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD	NAME TATE, CHRISTOPHER	TITLE Change	NAME 2830 W State Rd 84 #102 Ft. Lauderdale, FL 33312
STREET ADDRESS 6570 GRIFFIN RD., SUITE 102	CITY-ST-ZIP DAVIE, FL 33314	STREET ADDRESS 2830 W State Rd 84 #102	CITY-ST-ZIP Ft. Lauderdale, FL 33312
TITLE SD	NAME SEBESTA, MICHELLE	TITLE Change	NAME 2830 W State Rd 84 #102
STREET ADDRESS 6570 GRIFFIN RD #102	CITY-ST-ZIP DAVIE, FL 33314	STREET ADDRESS 2830 W State Rd 84 #102	CITY-ST-ZIP Ft. Lauderdale, FL 33312
TITLE TD	NAME CARABALLO, PABLO	TITLE Change	NAME 2830 W State Rd 84 #102
STREET ADDRESS 6570 GRIFFIN RD #102	CITY-ST-ZIP DAVIE, FL 33314	STREET ADDRESS 2830 W State Rd 84 #102	CITY-ST-ZIP Ft. Lauderdale, FL 33312
TITLE D	NAME TATE, JASON	TITLE Change	NAME 2830 W State Rd 84 #102
STREET ADDRESS 6570 GRIFFIN RD #102	CITY-ST-ZIP DAVIE, FL 33314	STREET ADDRESS 2830 W State Rd 84 #102	CITY-ST-ZIP Ft. Lauderdale, FL 33312
TITLE Change	NAME Change	TITLE Change	NAME Change
STREET ADDRESS Change	CITY-ST-ZIP Change	STREET ADDRESS Change	CITY-ST-ZIP Change
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: 		DATE 3.3.08	
Signature and typed or printed name of signing officer or director		Date Daytime Phone #	