2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000066055

Entity Name: 1001 TRANSPORTATION INC

FILED Jan 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5386 PARADISE CAY CIRCLE KISSIMMEE, FL 34746 **Current Mailing Address: New Mailing Address:** 5386 PARADISE CAY CIRCLE KISSIMMEE, FL 34746 FEI Number: 26-3109424 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARROSO, MARCELO 5386 PARÁDISE CAY CIRCLE KISSIMMEE, FL 34746 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BARROSO, MARCELO Name: Name: 5386 PARADISE CAY CIRCLE Address: Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: VΡ Title: Title: () Delete (X) Change () Addition Name: FERNANDES, SYLVIO Name: PACHECO, JAIR J 5386 PARADISE CAY CIRCLE 5467 VINELAND RD #6109 Address: Address: KISSIMMEE, FL 34746 ORLANDO, FL 32811 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition ROISSMANN, GUSTAVO DOS SANTOS, VICTOR Name: Name: 5386 PARADISE CAY CIRCLE 1829 WEST POINTE CIR Address: Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: ORLANDO, FL 32835 Title: () Delete Title: (X) Change () Addition PACHECO, JAIR JR RIBEIRO, DANIEL Name: Name: Address: 5386 PARADISE CAY CIRCLE Address: 2474 LAKE DEBRA DR #3306 City-St-Zip: City-St-Zip: KISSIMMEE, FL 34746 ORLANDO, FL 32835 Title: (X) Delete Title: () Change () Addition DOS SANTOS, VICTOR Name: Name: 5386 PARADISE CAY CIRCLE Address: Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip: Title: (X) Delete Title: () Change () Addition RIBEIRO, DANIEL Name: Name: 5386 PARADISE CAY CIRCLE Address: Address: City-St-Zip: City-St-Zip: KISSIMMEE, FL 34746

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.

SIGNATURE: MARCELO BARROSO P 01/22/2009