## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000002063

Entity Name: ACME TRUCK LINE, INC.

FILED Aug 13, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
3550 N. EDGEWOOD AVE. JACKSONVILLE, FL				121 PAILET DRIVE HARVEY, LA 70058		
Current M	lailing Addres	ss:	New Ma	iling Address:		
P O BOX 1 HARVEY,	183 LA 700590183	}				
FEI Number	: 72-0540787	FEI Number Applied For()	FEI Number Not Ap	pplicable ( ) Certificate of Status Desired ( )		
Name and	l Address of C	Current Registered Agent:	Name ar	nd Address of New Registered Agent:		
1201 HAYS TALLAHAS The above	ATION SERVIC S STREET SSEE, FL 3230 e named entity s e of Florida.	012525 US	urpose of changinເ	g its registered office or registered agent, or both		
SIGNATUI						
		ic Signature of Registered Age		Date		
		3(2)(b), F.S., the corporation did not g Trust Fund Contribution (  ).	receive the prior no	tice.		
	S AND DIREC	•	ADDITIO	ONS/CHANGES TO OFFICERS AND DIRECTO		
Title: Name: Address: City-St-Zip: Title:	COATNEY, MIC 31 CYPRESS F NEW ORLEANS	POINT	Title: Name: Address: City-St-Zip Title:	P (X) Change ( ) Addition COATNEY, MICHAEL D 121 PAILET DRIVE HARVEY, LA 70058 ST (X) Change ( ) Addition		
Name: Address: City-St-Zip:	FOSTER, KIMB 420 AVENUE E MARRERO, LA		Name: Address: City-St-Zip	FOSTER, KIMBERLY 121 PAILET DRIVE D: HARVEY, LA 70058		
Title: Name: Address: City-St-Zip:	V () SANCHEZ, JOH 2244 LITCHWO HARVEY, LA 7	OOD	Title: Name: Address: City-St-Zip	()Change ()Addition o:		
Title: Name: Address: City-St-Zip:	V () MONCRIEF, GE 1351 HERMAN BREAUX BRIDG	DUPLANTIS	Title: Name: Address: City-St-Zip	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	V () ROYE, STEPHI 7602 SANDYG/ HOUSTON, TX	ALE LN.	Title: Name: Address: City-St-Zip	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	V () NOEY, MILTON 328 E. LITTLE ( CEDAR HILL, T	CREEK	Title: Name: Address: City-St-Zip	( ) Change ( ) 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.

SIGNATURE: KIMBERLY FOSTER SEC. 08/13/2007