## **2005 FOR PROFIT CORPORATION**

## FILED Feb 02, 2005 08:00 AM **ANNUAL REPORT** Secretary of State DOCUMENT # P00000025014 1. Entity Name ALL TERRAIN ENVIRONMENTAL, INC. Principal Place of Business Mailing Address 4839 S.W. 148 AVENUE 4839 S.W. 148 AVENUE PMB 524 PMB 524 DAVIE, FL 33330 DAVIE, FL 33330 01222005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0310368 Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent HICKSON, JAMES W JR. DO NOT WRITE 4839 S.W. 148 AVENUE PMB 524 IN THIS SPACE **DAVIE, FL 33330** 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 Synature, typed or printed name of registered upont and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS U00000211038 TITLE OP 02/02/05-80107-004 150.00 HICKSON, JAMES W JR. NAME STREET ADDRESS 4839 SW 148 AVE., PMB 524 **DAVIE, FL 33330** CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP DILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

THIE NAME STREET ADDRESS CITY-ST-ZIP

> men B OR DIRECTOR

Daytime Phone #