

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000115036

**FILED**  
**Apr 23, 2010**  
**Secretary of State**

**Entity Name:** PENA TRUCKING & EXCAVATING, INC.

**Current Principal Place of Business:**

411 GOLDEN GATE BLVD WEST  
NAPLES, FL 341202168

**New Principal Place of Business:**

411 GOLDEN GATE BLVD WEST  
NAPLES, FL 34120

**Current Mailing Address:**

411 GOLDEN GATE BLVD WEST  
NAPLES, FL 341202168

**New Mailing Address:**

411 GOLDEN GATE BLVD WEST  
NAPLES, FL 34120

FEI Number: 65-1158240

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PENA, CARMEN  
411 GOLDEN GATE BLVD WEST  
NAPLES, FL 341202168 US

**Name and Address of New Registered Agent:**

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:**

Title: DP  
Name: PENA, GUILLERMO  
Address: 411 GOLDEN GATE BLVD WEST  
City-St-Zip: NAPLES, FL 341202135

Title: DVT  
Name: PENA, CARMEN  
Address: 411 GOLDEN GATE BLVD WEST  
City-St-Zip: NAPLES, FL 341202168

Title: DS  
Name: PENA, GUILLERMO A  
Address: 411 GOLDEN GATE BLVD WEST  
City-St-Zip: NAPLES, FL 341202168

I hereby 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 all other like empowered.

SIGNATURE: CARMEN PENA

VP

04/23/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date