

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000139423

FILED
Apr 29, 2006
Secretary of State

Entity Name: WEST COAST CARTING, INC.

Current Principal Place of Business:

1720 SE 13TH TERRACE
CAPE CORAL, FL 33990 US

New Principal Place of Business:

2031 NE 8TH PLACE
CAPE CORAL, FL 33909 US

Current Mailing Address:

1720 SE 13TH TERRACE
CAPE CORAL, FL 33990 US

New Mailing Address:

2031 NE 8TH PLACE
CAPE CORAL, FL 33909 US

FEI Number: 20-1720332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANTONACCI, MICHELLE
1720 SE 13TH TERRACE
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

ANTONACCI, MICHELLE
2031 NE 8TH PLACE
CAPE CORAL, FL 33909 US

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: _____

04/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANTONACCI, MICHELLE
Address: 1720 SE 13TH TERRACE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: VP () Delete
Name: DILAPI, ANTHONY
Address: 1720 SE 13TH TERRACE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: ST () Delete
Name: ANTONACCI, PASQUALE
Address: 1720 SE 13TH TERRACE
City-St-Zip: CAPE CORAL, FL 33990 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANTONACCI, MICHELLE
Address: 2031 NE 8TH PLACE
City-St-Zip: CAPE CORAL, FL 33909 US

Title: VP (X) Change () Addition
Name: DILAPI, ANTHONY
Address: 2031 NE 8TH PLACE
City-St-Zip: CAPE CORAL, FL 33909 US

Title: ST (X) Change () Addition
Name: ANTONACCI, PASQUALE
Address: 2031 NE 8TH PLACE
City-St-Zip: CAPE CORAL, FL 33909 US

I hereby certify that the information supplied with this filing does not qualify for the 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: PASQUALE ANTONACCI

ST

04/29/2006

Electronic Signature of Signing Officer or Director

Date