


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008 08:00 AM
Secretary of State


DOCUMENT # P92000006064

1. Entity Name
ANDREW HAULING, INC



Principal Place of Business MARIA I. FERNANDEZ 1435 WEST 31ST STREET HIALEAH, FL 33012	Mailing Address MANIA I. FERNANDEZ 1435 WEST 31ST STREET HIALEAH, FL 33012
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DO NOT WRITE IN THIS SPACE



03142008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0373420	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, WALFRIDO D
1435 WEST 31ST STREET
HIALEAH, FL 33012

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD	NAME FERNANDEZ, MARIA I
STREET ADDRESS 1435 WEST 31TH STREET	CITY - ST - ZIP HIALEAH, FL
TITLE PV	NAME FERNANDEZ, WALFRIDO D
STREET ADDRESS 1435 W 31 ST	CITY - ST - ZIP HIALEAH, FL 33012
TITLE T	NAME FERNANDEZ, JULIO C
STREET ADDRESS 1435 W 31 ST	CITY - ST - ZIP HIALEAH, FL 33012
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP

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U00000952092
 06/04/08-80065-010 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Maria I Fernandez* **3/14/08** **(305) 822-3479**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #