2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 166847

FILED Jan 10, 2006 Secretary of State

Entity Name: BESTWAY REFRIGERATED SERVICE, INC.

Current Principal Place of Business:		New Principal Place of Business:	
994 ORANGE A\ .O. BOX 908 LYMOUTH, FL 3			
urrent Mailing /	Address:	New Mailing Address:	
994 ORANGE A\ .O. BOX 908 LYMOUTH, FL 3			
El Number: 59-1024	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
ame and Addre	ss of Current Registered Agent	: Name and Address of New Registered Agent:	
D5 POND DR			
e above named	l entity submits this statement for t	the purpose of changing its registered office or registered agent, or both,	
ne above named the State of Flor	l entity submits this statement for t	the purpose of changing its registered office or registered agent, or both,	
ne above named the State of Flor GNATURE:	l entity submits this statement for t		
ne above named the State of Flor GNATURE:E	l entity submits this statement for t rida.		
the State of Flor IGNATURE:E	l entity submits this statement for t rida. Electronic Signature of Registered Financing Trust Fund Contribution ().		
he above named the State of Flor IGNATURE: Exection Campaign F FFICERS AND I tle: P ame: CAMPE Idress: 157 PC tty-St-Zip: MT DO	l entity submits this statement for t rida. Electronic Signature of Registered Financing Trust Fund Contribution ().	Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: CEO (X) Change () Addition Name: CAMPBELL, DAN E Address: 157 POND RD City-St-Zip: MT DORA, FL 32757 Title: VP () Change (X) Addition	
ne above named the State of Flor GNATURE: Exection Campaign F FFICERS AND I Ile: P Imme: CAMPE Idress: 157 PC ty-St-Zip: MT DO	I entity submits this statement for trida. Electronic Signature of Registered Financing Trust Fund Contribution (). DIRECTORS: () Delete BELL, DAN E DND RD PRA, FL 32757	Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: CEO (X) Change () Addition Name: CAMPBELL, DAN E Address: 157 POND RD City-St-Zip: MT DORA, FL 32757	

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: DAN E. CAMPBELL CEO 01/10/2006