


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 670688</b> 1. Entity Name <b>JOHNNY'S TRACTOR TRAILER SERVICE, INC.</b>	
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Principal Place of Business <b>3383 S.W. 11TH AVE, ALAN LOEFFLER FT. LAUDERDALE, FL 33315 US</b>	Mailing Address <b>3383 S.W. 11TH AVE, ALAN LOEFFLER FT. LAUDERDALE, FL 33315 US</b>
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03152005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2010140</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent <b>LOEFFLER, ALAN J. 3383 SW 11TH AVE FT LAUDERDALE, FL 33315</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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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 *Alan J. Loeffler* (NOTE: Registered Agent signature required when reinstating) DATE 3-16-05

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>U00000269486 03/19/05-80012-021 150.00</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOEFFLER, ALAN J. 3383 S.W. 11TH AVENUE FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOEFFLER, BRIAN 3383 SW 11TH AVENUE FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LOEFFLER, BARBARA 3383 SW 11TH AVENUE FORT LAUDERDALE, FL 33315
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 the empowered.

SIGNATURE: *Alan J. Loeffler* DATE 3-16-05 (954) 524-9209