2008 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 17, 2008 08:00 AN Secretary of State **DOCUMENT # F94000004645** 1. Entity Name AMP TRUCKING, INC. Mailing Address Principal Place of Business 4800 STATE ROAD 60, EAST 4800 STATE ROAD 60, EAST MULBERRY, FL 33860 MULBERRY, FL 33860 No Chg-P CR2E034 (11/05) 03062008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3264367 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CT CORPORATION 1200 S. PINE ISLAND DR PLANTAION, FL 33324 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 DATE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE BRINKMAN, ROBERT A NAME STREET ADDRESS 4800 STATE ROAD 60, EAST CITY-ST-ZIP MULBERRY, FL 33860 n4/n2/n8-80020-016 150.00 PCO₀ TITLE NAME VARNADBE, GLEN STREET ADDRESS 4800 STATE ROAD 60, EAST MULBERRY, FL 33860 CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED

AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Date

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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. If 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 of 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: