

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000004813

Entity Name: ABEL'S TRUCKING, LLC

FILED  
Jun 07, 2008  
Secretary of State

## Current Principal Place of Business:

6201 CANNOLI PLACE  
RIVERVIEW, FL 33569

## New Principal Place of Business:

6201 CANNOLI PLACE  
RIVERVIEW, FL 33578

## Current Mailing Address:

6201 CANNOLI PLACE  
RIVERVIEW, FL 33569

## New Mailing Address:

6201 CANNOLI PLACE  
RIVERVIEW, FL 33578

FEI Number: 20-8236644      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

ABEL, LOPEZ RIOS  
6201 CANNOLI PLACE  
REIVERVIEW, FL 33569      US

## Name and Address of New Registered Agent:

ABEL, LOPEZ RIOS  
6201 CANNOLI PLACE  
REIVERVIEW, FL 33578      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: ABEL LOPEZ RIOS

06/07/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR      ( ) Delete  
Name: LOPEZ RIOS, ABEL  
Address: 6201 CANNOLI PLACE  
City-St-Zip: REIVERVIEW, FL 33569

## ADDITIONS/CHANGES:

Title: MGR      (X) Change      ( ) Addition  
Name: LOPEZ RIOS, ABEL  
Address: 6201 CANNOLI PLACE  
City-St-Zip: REIVERVIEW, FL 33578

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ABEL LOPEZ RIOS

MGR

06/07/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date