

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2007 8:00 am
Secretary of State

01-29-2007 90083 009 ***150.00

DOCUMENT # L18105	
1. Entity Name RETRANCA EQUIPMENT & TRUCKING, CORP.	

Principal Place of Business 1280 SW 26 AVE. SUITE 4 FT. LAUDERDALE, FL 33312 US	Mailing Address 1280 SW 26 AVE SUITE 4 FT. LAUDERDALE, FL 33312 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

01162007 Chg-P CR2E034 (12/06)

4. FEI Number 65-0143941	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent TRUJILLO, ANGEL C 1280 S.W. 26TH AVENUE SUITE 4 FT. LAUDERDALE, FL 33312	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007, Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	OPT TRUJILLO, ANGEL C. 2700 NE 26TH STREET FORT LAUDERDALE, FL 33305 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS TRUJILLO, LEONARDO A 3230 SW 92ND CT MIAMI, FL 33165 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	6270 Farragut Street Hollywood, FL 33024 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP TRUJILLO, JASON 1280 SW 26 AVE. FT. LAUDERDALE, FL 33312 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	3564 sw 16 Court ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

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: *Reynolds* JAN 26, 2007 954-581-6613
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone