2006 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT DOCUMENT # L78971 1. Entity Name MAGNA TRUCK, INC. Principal Place of Business 2005 INDUSTRIAL PARK ROAD MULBERRY, FL 33860 US MULBERRY, FL 33860-1303 US

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 24, 2006 08:00 AN Secretary of State

			20 15 1	1				
2005 INDUSTRIAL PARK ROAD F		Mailing Address PO BOX 1303 MULBERRY, FL 33860-1303 US						
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent					No Chg-P er 17530 of Status Desired	CR2E034 (11/05)	ed For pplicable anal	
HICKS, DANIEL J. 13399 NW 113TH AVE HIALEAH, FL 33018				DO NOT WRITE IN THIS SPACE				
8. The above named exitive 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 Signature, typed or printed name of registered agent and the if applicable. (NOTE Registered Agent signature required when reinstating). DATE								
FILE NOWIN FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE P HICKS, DANIEL J. 20521 S.W. 50TH PLACE FT. LAUDERDALE, FL	ECTORS .				0533901 -80141-012 19	8. 75 27. 88	
TITLE NAME STREET ADDRESS CITY -ST - ZIP	T CONSTANCE HICKS 20521 S.W. 50TH PLACE FT. LAUDERDALE, FL							
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					NOT W			
NAME STREET ADDRESS CITY-ST-ZIP				-	THIS SE	ACL		
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP						4.5.	19 ₁₀ 11 - 11 - 1	
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 507, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all fither like empowered.								

Date

Daytime Phone #