2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000006237

Entity Name: CRUZ TRUCKING, INC.

FILED Mar 02, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

515 SHADY PINE CT 13910 SOUTH GREATER HILLS BLVD.

MINNEOLA, FL 34715 CLERMONT, FL 34711

Current Mailing Address: New Mailing Address:

515 SHADY PINE CT 10531 BRONSON ROAD MINNEOLA, FL 34715 CLERMONT, FL 34711

FEI Number: 59-3622712 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CRUZ, DIXON CRUZ, DIXON

515 SHADY PINE CT 10531 BRONSON ROAD MINNEOLA, FL 34715 US CLERMONT, FL 34711 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: 03/02/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 CRUZ, DIXON D
 Name:
 CRUZ, DIXON D

 Address:
 515 SHADY PINE CT
 Address:
 10531 BRONSON ROAD

 City-St-Zip:
 MINNEOLA, FL 34715
 City-St-Zip:
 CLERMONT, FL 34711

Title: V () Delete Title: V (X) Change () Addition

 Name:
 CRUZ, PABLO J
 Name:
 CRUZ, PABLO J

 Address:
 4631 BEIVEDERE ROAD
 Address:
 515 SHADY PINE COURT

 City-St-Zip:
 WEST PALM BEACH, FL 33415
 City-St-Zip:
 MINNEOLA, FL 33415

Title: MGR () Delete Title: () Change () Addition

 Name:
 CRUZ, PABIO T
 Name:

 Address:
 12521 ERYN BLVD
 Address:

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 CRUZ, EGDY A
 Name:
 CRUZ, EGDY A

 Address:
 515 SHADY PINE COURT
 Address:
 10531 BRONSON ROAD

 City-St-Zip:
 MINNCOLA, FL 34715
 City-St-Zip:
 CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EGDY A. CRUZ ST 03/02/2007