2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 20, 2006 8:00 am
Secretary of State
05-08-2006 90297 007 ***150.00

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DOCUMENT # P00000007618

1. Entity Name
MANSO TRUCK SERVICES, INC.

Principal Place of Business	Mailing Address
4716 NORTH GRADY TAMPA, FL 33614	4716 NORTH GRADY TAMPA, FL 33614

DO NOT WRITE IN THIS SPACE

04212006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0975868
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PALACIO, LUIS
6815 FOUNTAIN AVE
TAMPA, FL 33634

DO NOT WRITE 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: [signature] 06-16-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PALACIO, LUIS
STREET ADDRESS	6815 FOUNTAIN AVE
CITY-ST-ZIP	TAMPA, FL 33634
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

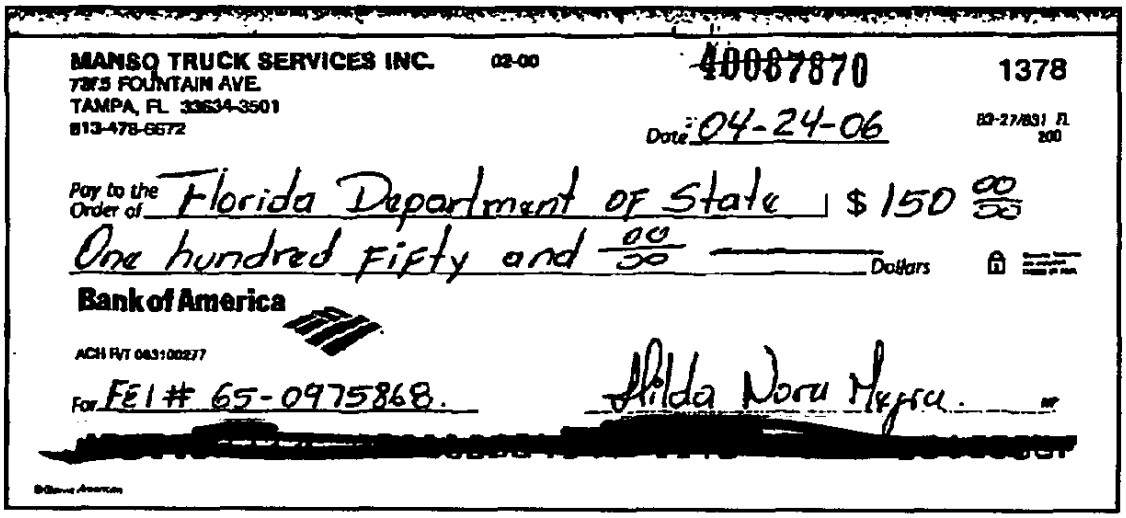
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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: [signature] 06-16-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Check Image – Front and Back ATTACHMENT 66020038 #P00000007618

Posting Date: 05/23/2006 **Check #:** 1378 **Amount:** $150.00

Reference: 86640824099 **Account:** DDA-4397 **Nickname:**



MANSO TRUCK SERVICES INC.
7375 FOUNTAIN AVE.
TAMPA, FL 33634-3501
813-478-6572

02-00 40067870 1378

Date 04-24-06 63-27/631 FL 200

Pay to the Order of Florida Department of State $ 150 00/100

One hundred fifty and 00/100 Dollars

Bank of America

ACH R/T 063100277

For FEI # 65-0975868. Alida Nora Mejia

BANK OF AMERICA JAX

MAY 08 2006

DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT. # 100006780