2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000075420

Address:

City-St-Zip:

16400 NW 83RD CT.

MIAMI LAKES, FL 33016

FILED Feb 27, 2007 Secretary of State

Entity Name: ALLPORTS TRUCKING CORP. **Current Principal Place of Business: New Principal Place of Business:** 16400 NW 83RD COURT MIAMI LAKES, FL 33016 **Current Mailing Address: New Mailing Address:** P.O. BOX 4731 HIALEAH, FL 33014 FEI Number: 65-1138975 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: MANTILLA, NOELIO 16400 NW 83RD COURT MIAMI LAKES, FL 33016 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MANTILLA, MARIA C Name: Name: 16400 NW 83RD COURT Address: Address: City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: Title: Title: (X) Change () Addition () Delete GONZALEZ-MANTILLA, SANDRA Name: MANTILLA, ANA FERNANDEZ Name: 7881 NW 170 TERRACE 360 31 STREET NW Address: Address: HIALEAH, FL 33015 NAPLES, FL 34120 City-St-Zip: City-St-Zip: Title: VPD Title: () Delete SD (X) Change () Addition MANTILLA, HAROLD MANTILLA, HAROLD Name: Name: 7881 NW 170 TERR 7881 NW 170 TERR Address: Address: City-St-Zip: HIALEAH, FL 33018 City-St-Zip: HIALEAH, FL 33018 Title: () Delete Title: () Change () Addition MANTILLA, NOELIO Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: MARIA MANTILLA PD 02/27/2007