2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000100134

Entity Name: HARVEST MOON TRUCKING, INC.

FILED Apr 29, 2004 Secretary of State

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

2263 NW 2ND AVENUE STE 204 BOCA RATON, FL 33431

New Mailing Address: Current Mailing Address:

2263 NW 2ND AVENUE STE 204

DELRAY BEACH, FL 33447 BOCA RATON, FL 33431

FEI Number: 65-1049306 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

PO BOX 1106

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

MCCALLOPS, BRUCE W MCCALLOPS, BRUCE W 2263 NW 2ND AVENUE STE 204 PO BOX 1106 BOCA RATON, FL 33431 DELRAY BEACH, FL 33447

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: BRUCE MCCALLOPS 04/29/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

MCCALLOPS, BRUCE MCCALLOPS, BRUCE Name: Name: 2263 NW 2ND AVENUE STE 204 Address: PO BOX 1106 Address:

City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: DELRAY BEACH, FL 33447

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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.

Ρ SIGNATURE: BRUCE MCCALLOPS 04/29/2004