

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000102344

1. Entity Name
M & R TRUCKING OF S.W. FLA INC.



Principal Place of Business
**2102 NE 15TH TERR.
CAPE CORAL, FL 33909**

Mailing Address
**2102 NE 15TH TERR.
CAPE CORAL, FL 33909**



07172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FBI Number
65-1051060

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**DI LULLO, RUSSELL L
2102 NE 15TH TERR.
CAPE CORAL, FL 33909**

**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, 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
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution: ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD
NAME DI LULLO, RUSSELL L
STREET ADDRESS 2102 NE 15TH TERR.
CITY-ST-ZIP CAPE CORAL, FL 33909

TITLE STD
NAME DI LULLO, MARY J
STREET ADDRESS 2102 NE 15TH TERR.
CITY-ST-ZIP CAPE CORAL, FL 33909

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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U00000571110
07/19/06-00002-006 150.00

**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:

Russell L. Di Lullo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Russell L. Di Lullo

7-17-06
Date

239-458-7604
Daytime Phone #