

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2008 08:00 A
Secretary of State

DOCUMENT # P01000024415

1. Entity Name

GILLES POULIOT TRUCKING, INC.



Principal Place of Business

7800 W OAKLAND PARK BLVD.
BLDG "G"
SUNRISE, FL 33351

Mailing Address

7800 W OAKLAND PARK BLVD.
BLDG "G"
SUNRISE, FL 33351



03312008 No Chg-P CR2E034 (11/05)

4. FEI Number

65-1085422

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

POULIOT, GILLES
5181 W. OAKLAND PARK BLVD
#110
LAUDERDALE LAKE, FL 33313

**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
After May 1, 2008 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 POULIOT, GILLES
STREET ADDRESS 5181 W. OAKLAND PARK BLVD APT 110
CITY-ST-ZIP LAUDERDALE LAKE, FL 33313

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04/29/08-80041-001 150.00

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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: Gilles Pouliot

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-12-08

Date

Daytime Phone #