2005 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 18, 2005 08:00 AM Secretary of State **DOCUMENT # P01000037960** 1. Entity Name K.W.L. TRANSPORT, INC. Principal Place of Business ___ Mailing Address 14344 N.E. 56TH AVENUE 14344 N.E. 56TH AVENUE OKEECHOBEE, FL OKEECHOBEE, FL CR2E034 (10/03) 07072005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Numbor 65-1130725 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MILLER, COREY DO NOT WRITE 391 HIGHWAY 441 S. OKEECHOBEE, FL 34974 IN THIS SPACE 9. 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. 11 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when retristating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution Due by September 7, 2005 Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE NAME PADGETT, KENNETH STREET ADDRESS 14344 N.E. 56TH AVENUE CITY-ST-ZIP OKEECHOBEE, FL TITLE PADGETT, WENDY NAME, STREET ADDRESS 14344 N.E. 56TH AVENUE CITY-ST-ZIP OKEECHOBEE, FL TITLE NAME PADGETT, LINDSAY STREET ADDRESS 14344 NE 56TH AVE DO NOT WRITE CITY-ST-ZIP OKEECHOBEE, FL 34972 rhte IN THIS SPACE NAME PADGETT, DEKE STREET ADDRESS 14344 NE 56TH AVE. CITY-ST-7IP OKEECHOBEE, FL 34972 11111 NAME STREET ADDRESS CHY-\$7-7/P TITLE NAME STREET ADDRESS

12. Thereby cortify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 AND TYPED OR PRINTED NAME CYCLING OF FICER OR DIRECTOR

CITY-ST ZIP

8-15-05 863-434-1489
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