## 2007 FOR PROFIT CORPORATION

## FILED ANNUAL REPORT Jan 29, 2007 08:00 AM DOCUMENT # P01000037960 **Secretary of State** 1. Entity Name K.W.L. TRANSPORT, INC. Mailing Address Principal Place of Business 14344 N.E. 56TH AVENUE 14344 N.E. 56TH AVENUE OKEECHOBEE, FL 34972 OKEECHOBEE, FL 34972 US CR2E034 (11/05) 01142007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 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 3391 HIGHWAY 441 S. OKEECHOBEE, FL 34974 IN THIS SPACE 1. 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, typed or priviled name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PADGETT, KENNETH NAME STREET ADDRESS 14344 N.E. 56TH AVENUE OKEECHOBEE, FL CITY-ST-ZIP U00000608674 SD MLE 02/01/07-80019-013 150.00 PADGETT, WENDY NAME 14344 N.E. 56TH AVENUE STREET ADDRESS CITY-ST-2IP OKEECHOBEE, FL TITLE PADGETT, LINDSAY NAME STREET ADDRESS 14344 NE 56TH AVE. DO NOT WRITE CITY-ST-ZIP OKEECHOBEE, FL 34972 IN THIS SPACE TETT F NAME PADGETT, DEKE 14344 NE 56TH AVE. STREET ADDRESS CITY-ST-ZIP OKEECHOBEE, FL 34972

12. I hereby certify that the information supplied with this filling 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS CITY - ST-ZIP