


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 25, 2005 8:00 am
Secretary of State

07-25-2005 90097 017 ***150.00

DOCUMENT # P01000038985	
1. Entity Name F.A.E. TRUCKING, INC.	

Principal Place of Business 6253 NORTHWEST 2ND STREET MIAMI FL 33126	Mailing Address 6253 NORTHWEST 2ND STREET MIAMI FL 33126
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2. Principal Place of Business		3. Mailing Address P.O. Box 260172	
Suite, Apt. #, etc.		Suite, Apt. #, etc. MIAMI Florida	
City & State		City & State MIAMI FL	
Zip 33126	Country	Zip 33126	Country MIAMI FL

1st MOORE CR2E034 (10/04)

4. FEI Number 65-1092271	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent FONSECA, ANA 6253 NW 2 STREET MIAMI FL 33126		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

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 *Ana Fonseca* (NOTE: Registered Agent signature required when reissuing) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD FONSECA, ANA 6253 NORTHWEST 2ND STREET MIAMI FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: *Ana Fonseca* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

500572-84 7-20-05.
PO100038985

To whom it may concern:

I'm sending a check for \$150.00 This is the first letter I received. Last year happened the same. I'm really in a very bad financial situation since last year I was diagnosis with breast cancer. If I have to pay the 400 dollars penalty, please let me know and give me the opportunity to pay a hundred per month. Thank you.

Love Forever

My new mailing address.

F&E Trucking

P O Box 260172

Miami FL 33126.