AUG-22-2005 11:45A FROM:DAN MURPHY ACCOUNTIN 9417641959

2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

07-25-2005 90098 039 ***150.00

DOCUMENT # P01000057268

1. Entity Name
BENFATTA TRUCKING, INC.

Principal Place of Business	Mailing Address
~~348 GLEN OAK ROAD~~ ~~VENICE, FL 34293~~ 1404 FRIAR TUCK LANE SPRING HILL, FL.	~~348 GLEN OAK ROAD~~ ~~VENICE, FL 34293~~ P.O. Box 68 HARPURSVILLE N.Y. 13787
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

08222005 Chg-P CR2E034 (10/03)

4. FEI Number 65-1112816 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BENFATTA, JOSEPH A ~~20450 WILKIE AVE.~~ ~~PORT CHARLOTTE, FL 33954~~ 1404 Friar Tuck Lane Springhill FL 34607	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 ____________________ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BENFATTA, JOSEPH A ~~348 GLEN OAK ROAD~~ ~~VENICE, FL 34293~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1404 Friar Tuck Lane Springhill FL 34607
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BENFATTA, DEBORAH A ~~348 GLEN OAK ROAD~~ ~~VENICE, FL 34293~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1404 Friar Tuck Lane Springhill FL 34607
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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: JOSEPH A. BENFATTA [signature] 8-22-2005 941-661-1350
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #