


FILED
Jun 22, 2007 8:00 am
Secretary of State

06-22-2007 90002 024 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000065016		
1. Entity Name M C H TRUCKING, INC.		
Principal Place of Business 6197 WILLOUGHBY CIRCLE LAKE WORTH, FL 33463		Mailing Address 6197 WILLOUGHBY CIRCLE LAKE WORTH, FL 33463
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PITTER, CARL S 7447 NW 57TH ST TAMARAC, FL 33319		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCINTOSH, HORANCE G JR 6197 WILLOUGHBY CIRCLE LAKE WORTH, FL 33463	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCINTOSH, BEVERLY R 7753 NORTH TREE WAY LAKE WORTH, FL 33467	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCINTOSH, SOPHIA L 6197 WILLOUGHBY CIRCLE LAKE WORTH, FL 33463	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <u><i>[Signature]</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>561-248-8557</u> <small>Daytime Phone #</small>

ATTACHMENT
40121475

Reference Number: P01000065016

6197 Willoughby Circle
Lake Worth, FL 33163
June 18, 2007

Florida Department of State
Division of Corporation
P.O. Box 1500
Tallahassee, FL 32302-1500

Attn: Annual Report Section,

I have received a letter stating that you have received my annual report application form, but not the fee. The check was sent off along with the application it is check number 3762. I was out of town when I received the letter stating that you have not received the fee and it is pass the 30 days you stated in the letter. I spoke with one of your representative and told me just send in a copy of your letter with a check amounting \$150.00.

Thank you for your co-operation.

Sincerely,


Sophia McIntosh