


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2005 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # P01000081145 1. Entity Name ALEX TRUCKING SERVICES, INC. |  |
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|---|---|
| Principal Place of Business 6117 NW 72ND AVENUE MIAMI, FL 33166 | Mailing Address 6117 NW 72ND AVENUE MIAMI, FL 33166 |
|---|---|



04072005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-1130559 | Applied For Not Applicable |
|------------------------------------|-------------------------------|

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|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|---------------------------------------|

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**LAPEYRE, ALEXIS
6117 NW 72 AVE.
MIAMI, FL 33166**

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DPS LAPEYRE, ALEXIS 6195 W. 18 AVE. APT. 6-121 HIALEAH, FL 33012 |
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04/18/05-80106-010 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **Alex La Peyre**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/07/05
Date

(786) 487-3840
Daytime Phone #