


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000091205 1. Entity Name V&A TRUCKING, INC.	
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Principal Place of Business 4276 ADOLPH AVENUE NORT PORT, FL 34286	Mailing Address POST OFFICE BOX 381228 MURDOCK, FL 33938-1228
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03142006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1139845	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRITO, ADEL
4276 ADOLPH AVENUE
NORTH PORT, FL 34288

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BRITO, ADEL 4276 ADOLPH AVENUE NORT PORT, FL 34286
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRITO, ADEL 4276 ADOLPH AVE NORTH PORT, FL 34286
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRITO, ADEL 4276 ADOLPH 3501 W 11TH AVE HIALEAH, FL 33012
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05/08/06-80052-015 150.00

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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: Adel Brito 4-24-06 941-678-9764
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #