

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000095220

Entity Name: ALL FLORIDA TRUCK SALES, INC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

18185 N. HWY 301
CITRA, FL 32113

New Principal Place of Business:

Current Mailing Address:

PO BOX 477
CITRA, FL 32213

New Mailing Address:

PO BOX 477
CITRA, FL 32113

FEI Number: 65-1141740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORESKEY, KEN
PO BOX 477
CITRA, FL 32113 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ADCOCK, FRANCIS
Address: 10161 SW 186TH AVE.
City-St-Zip: DUNNELLON, FL 34432

Title: S () Delete
Name: ORESKY, KEN
Address: 10161 SW 186TH AVE.
City-St-Zip: DUNNELLON, FL 34432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: ADCOCK, FRANCIS
Address: PO BOX 477
City-St-Zip: CITRA, FL 32113

Title: P (X) Change () Addition
Name: ORESKY, KEN
Address: PO BOX 477
City-St-Zip: CITRA, FL 32113

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEN ORESKY

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date