


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P01000121898</b>	
1. Entity Name <b>PALMDALE EXPRESS, INC.</b>	

Principal Place of Business <b>118 SOUTH PARROTT AVE OKEECHOBEE, FL 34974</b>	Mailing Address <b>911 NORTH 2ND AVENUE FT. PIERCE, FL 34990</b>
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01232006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>80-0005353</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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IN THIS SPACE**

6. Name and Address of Current Registered Agent  <b>KINO, GREGORY S ESQ 515 N FLAGLER DRIVE STE 1700 WEST PALM BEACH, FL 33401</b>
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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. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHEATHAM, LACHLAN 911 NORTH 2ND STREET FT. PIERCE, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SALMON, NITA 911 NORTH 2ND STREET FT. PIERCE, FL 34982
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHEATHAM, KENDALL 911 NORTH 2ND STREET FT. PIERCE, FL 34990
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03/21/06-80076-008 150.00

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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:** \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR