

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000029511

Entity Name: ALLEY KAT TRUCKING, INC.

FILED
Jan 17, 2006
Secretary of State

Current Principal Place of Business:

1294 BRAMPTON COVE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

1294 BRAMPTON COVE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 04-3631551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, LEVON
715 MHP LOT# 131
BELLE GLADE, FL 33430 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: D () Delete
Name: MCNEILL, CHRISTA
Address: 1294 BRAMPTON COVE
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: FOSTER, LEVON
Address: P.O. BOX 2683
City-St-Zip: BELLE GLADE, FL 33430

Title: D () Delete
Name: MCNEILL, JAMES S
Address: 1294 BRAMPTON COVE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MCNEILL, CHRISTA
Address: 1294 BRAMPTON COVE
City-St-Zip: WELLINGTON, FL 33414

Title: P (X) Change () Addition
Name: FOSTER, LEVON
Address: P.O. BOX 2683
City-St-Zip: BELLE GLADE, FL 33430

Title: TR (X) Change () Addition
Name: MCNEILL, JAMES S
Address: 1294 BRAMPTON COVE
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: CHRISTA MCNEILL

VP

01/17/2006

Electronic Signature of Signing Officer or Director

Date