2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060591

Entity Name: COUNTRYWIDE TRUCKING CORP.

FILED May 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

24965 SW 129TH PATH 10804 S.W. 240 STREET HOMESTEAD, FL 33032 HOMESTEAD, FL 33032

Current Mailing Address: New Mailing Address:

24965 SW 129TH PATH 10804 S.W. 240 STREET HOMESTEAD, FL 33032 HOMESTEAD, FL 33032

FEI Number: 01-0702827 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JIMENEZ, ROLANDO
24965 SW 129TH PATH
HOMESTEAD, FL 33032 US

JIMENEZ, ROLANDO
10804 S.W. 240 STREET
HOMESTEAD, FL 33032 US

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: ROLANDO JIMENEZ 05/04/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: JIMENEZ, ROLANDO Name: JIMENEZ, ROLANDO

 Address:
 24965 SW 129TH PATH
 Address:
 10804 S.W. 240 STREET

 City-St-Zip:
 HOMESTEAD, FL 33032
 City-St-Zip:
 HOMESTEAD, FL 33032

Title: (X) Change () Addition Title: () Delete Name: JIMENEZ, EUNISSESS S Name: JIMENEZ. EUNISSESS S 24965 SW 129TH PATH 10804 S.W. 240 STREET Address: Address: City-St-Zip: HOMESTEAD, FL 33032 City-St-Zip: HOMESTEAD, FL 33032

Title: S () Delete Title: S (X) Change () Addition

 Name:
 JIMENEZ, EUNISSESS S
 Name:
 JIMENEZ, EUNISSESS S

 Address:
 24965 SW 129TH PATH
 Address:
 10804 S.W. 240 STREET

 City-St-Zip:
 HOMESTEAD, FL 33032
 City-St-Zip:
 HOMESTEAD, FL 33032

I hereby certify that the information supplied with this filing does not qualify 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: ROLANDI JIMENEZ P 05/04/2009