

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90567 046 ***150.00

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1. Entity Name
P&P TRANSPORTATION, INC.



4001000

Principal Place of Business
**1805-5TH AVE. WEST
PALMETTO, FL 34221**

Mailing Address
**1805-5TH AVE. WEST
PALMETTO, FL 34221**



2. Principal Place of Business
2711-3rd Ave. E.
Suite, Apt. #, etc.

3. Mailing Address
2711-3rd Ave. E.
Suite, Apt. #, etc.

04282005 Chg-P CR2E034 (10/03)

City & State
Palmetto FL
Zip
34221

City & State
Palmetto, FL
Zip
34221

4. FEI Number
51-0425961
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**POMPEY, CLARENCE JR.
1805-5TH AVE. WEST
PALMETTO, FL 34221**

7. Name and Address of New Registered Agent

Name **Pompey, Clarence Jr.**
Street Address (P.O. Box Number is Not Acceptable)
2711-3rd Ave. E.
City **Palmetto** FL **34221**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **OP** ☐ Delete
NAME **POMPEY, CLARENCE JR**
STREET ADDRESS **1805 5TH AVE W**
CITY-ST-ZIP **PALMETTO, FL 34221**

TITLE **RA** ☐ Delete
NAME **PAYTON, LURETTA RENAE**
STREET ADDRESS **2711 3RD AVE E**
CITY-ST-ZIP **PALMETTO, FL 34221**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **OP** ☐ Change ☐ Addition
NAME **Pompey, Clarence Jr.**
STREET ADDRESS **2711-3rd Ave. E.**
CITY-ST-ZIP **Palmetto, FL 34221**

TITLE **RA** ☐ Change ☐ Addition
NAME **Pompey, Luretta Renae**
STREET ADDRESS **2711-3rd Ave. E.**
CITY-ST-ZIP **Palmetto, FL 34221**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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: **Luretta R. Pompey** **4-28-05 (941) 737-3619**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #