


2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000013747		
1. Entity Name BC & SONS TRUCKING, INC.		

FILED

07 MAR -8 AM 9:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01102005 REINSTATEMENT

Principal Place of Business 2695 HIGHLAND AVE FT. MYERS, FL 33916 US	Mailing Address 2695 HIGHLAND AVE FT. MYERS, FL 33916 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent CANNADY, BEN L SR 2695 HIGHLAND AVE FT. MYERS, FL 33916	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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	DATE
<p>400092347474</p> <p>03/13/07--01014--021 **308.75</p>	

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P	TITLE	Secretary
NAME	CANNADY, BEN L JR	NAME	Valerie Cannady
STREET ADDRESS	2695 HIGHLAND AVE.	STREET ADDRESS	1800 milcosukee commons Dr # 212
CITY-ST-ZIP	FT. MYERS, FL 33916	CITY-ST-ZIP	Tallahassee, FL 32308
TITLE	V	TITLE	
NAME	CANNADY, BEN L SR	NAME	
STREET ADDRESS	2695 HIGHLAND AVE.	STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS, FL 33916	CITY-ST-ZIP	
TITLE	V	TITLE	
NAME	HOWARD, STONEWALL J	NAME	
STREET ADDRESS	2695 HIGHLAND AVE.	STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS, FL 33916	CITY-ST-ZIP	
TITLE	ST	TITLE	
NAME	CANNADY, EVELYN	NAME	
STREET ADDRESS	2695 HIGHLAND AVE.	STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS, FL 33916	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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 exemption.	
SIGNATURE: Valerie Cannady	3-8-07 (850) 878-3087
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone