

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000034126

1. Entity Name
DPR TRUCKING, CORP.



Principal Place of Business

3992 N.W. 176 TERRA
CAROL CITY, FL 33055

Mailing Address

3992 N.W. 176 TERRA
CAROL CITY, FL 33055



01112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
54-2104111

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

RODRIGUEZ, DAVIS P
3992 N.W. 176 TERRA
CAROL CITY, FL 33055

**DO NOT WRITE
IN THIS SPACE**

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 name of registered agent and title in police file

(NOTE: Registered Agent signature required when reinstating)

DATE

01/14/08

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME VARELA, MARGARITA
STREET ADDRESS 3992 N.W. 176 TERRA
CITY - ST - ZIP CAROL CITY, FL 33055

TITLE V
NAME RODRIGUEZ, DAVIS P
STREET ADDRESS 3922 N.W. 176 TERR.
CITY - ST - ZIP CAROL CITY, FL 33055

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000000818780
02/18/08-80002-001 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/14/08

716-229-9665