

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037623

FILED
Apr 30, 2007
Secretary of State

Entity Name: ESCOBEDO TRUCKING, INC.

Current Principal Place of Business:

5110 MASON DIXON AVENUE
BOWLING GREEN, FL 33834

New Principal Place of Business:

Current Mailing Address:

5110 MASON DIXON AVENUE
BOWLING GREEN, FL 33834

New Mailing Address:

5110 MASON DIXON AVENUE
PO. BOX 1504
BOWLING GREEN, FL 33834

FEI Number: 06-1691108

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESCOBEDO, SANDRA
5110 MASON DIXON AVENUE
BOWLING GREEN, FL 33834 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: PTD () Delete
Name: ESCOBEDO, SANDRA
Address: 5110 MASON DIXON AVENUE
City-St-Zip: BOWLING GREEN, FL 33834

Title: VSD () Delete
Name: ESCOBEDO, JUAN A
Address: 5110 MASON DIXON AVENUE
City-St-Zip: BOWLING GREEN, FL 33834

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SANDRA ESCOBEDO

PTD

04/30/2007

Electronic Signature of Signing Officer or Director

Date