2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000040100

REYNOLDS, MICHAEL

SARASOTA, FL 33117

460 9TH SW

Name:

Address:

City-St-Zip:

FILED May 01, 2006 Secretary of State

Entity Name: FLASH TRUCKING, INC.						
Current Principal Place of Business:			New Princi	New Principal Place of Business:		
2165 17TH SARASOTA	STREET A, FL 34234					
Current Mailing Address:			New Mailir	New Mailing Address:		
2165 17TH SARASOTA	STREET A, FL 34234					
FEI Number:	57-1162893	FEI Number Applied For ()	El Number Not Appli	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
2165 17TH	RICHARD G STREET A, FL 34234	US				
The above in the State		ubmits this statement for the purp	ose of changing it	ts registered office or registered agent, or both,		
SIGNATUR						
	Electronic	Signature of Registered Agent		Date		
	,	2)(b), F.S., the corporation did not re- Trust Fund Contribution ().	ceive the prior notice	е.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () E COLYER, RICHA 835 S OSPREY A SARASOTA, FL	\VE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () E MITCHELL, DALE 1609 CETONA DI BOYNTON BEAC	RIVE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition MITCHELL, DALE 13238 WHITE HAVEN LANE FT MYERS, FL 33912		
Title: Name: Address: City-St-Zip:	D () E LULFS, BRIAN 819 SHORE DRIV BOYNTON BEAC		Title: Name: Address: City-St-Zip:	D (X) Change () Addition LULFS, BRIAN 829 SHORE DRIVE BOYNTON BEACH, FL 33435		
Title:	D ()[Nelete	Title	D (X) Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

REYNOLDS, MICHAEL

NAPLES, FL 33117

460 9TH SW

SIGNATURE: RICHARD G COLYER **PRES** 05/01/2006