2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041770

Entity Name: ADVANCED QUALITY TRANSPORTATION SERVICE, INC.

FILED Jul 10, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
	LE SALE CT PRT MYERS, FL	33903	US					
Current Mailing Address:				New Ma	New Mailing Address:			
	LE SALE CT PRT MYERS, FL	33903	US					
FEI Number:	45-0510693	FEI Numbe	r Applied For()	FEI Number Not A	pplicable ()	Certificate of State	us Desired ()	
Name and	Address of Cu	rrent Reg	istered Agent:	Name a	nd Address	of New Registered	Agent:	
LITTEN, DO 423 ELLIS S NORTH FO		33903	US					
The above in the State		bmits this	statement for the pu	rpose of changin	g its register	ed office or registered	d agent, or both,	
SIGNATUR	E:							
	Electronic	Signature	of Registered Ager	t		Date		
Election Cam	paign Financing T	rust Fund (Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip: Title: Name:	P () D LITTEN, DONNA A 423 ELLIS STREE NORTH FORT MY ST () D MARKAL, ADRIAN	ET ERS, FL 33 elete	903 US	Title: Name: Address: City-St-Zip Title: Name:	423 ELLIS	ORT MYERS, FL 33903 U (X) Change () Addition	JS	
Address: City-St-Zip:	1915 N.E. 14TH T CAPE CORAL, FL	ERR.		Address: City-St-Zip	1915 N.E.	14TH TERR. RAL, FL 33909 US		
Title: Name: Address: City-St-Zip:	CEOP () D LUTTEN, MAX E 423 ELLIS ST NORTH FORT MY		903 US	Title: Name: Address: City-St-Zip	423 ELLIS	(X) Change () Addition AX E DIRECTO ST ORT MYERS, FL 33903 U		
Title: Name: Address: City-St-Zip:	()D	elete		Title: Name: Address: City-St-Zip	2717 SW	() Change (X) Additior ICHAEL E CEO/TRE 11TH COURT RAL, FL 33914 US	ח	
Title: Name: Address: City-St-Zip:	() D	elete		Title: Name: Address: City-St-Zip	2717 SW	() Change (X) Additior ACHAEL M SECRETE 11TH COURT RAL, FL 33914	ח	

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.

SIGNATURE: RACHAEL M. LITTEN S 07/10/2006