

# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000054803

Entity Name: UBA HAULING, INC.

FILED  
May 26, 2006  
Secretary of State

## Current Principal Place of Business:

5255 BENNING RD.  
JACKSONVILLE, FL 32254

## New Principal Place of Business:

## Current Mailing Address:

5255 BENNING RD.  
JACKSONVILLE, FL 32254

## New Mailing Address:

FEI Number: 51-0464730

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCGHEE, MESSINA L SR.  
5255 BENNING RD.  
JACKSONVILLE, FL 32254 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

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCGHEE, MESSINA  
Address: 5255 BENNING RD.  
City-St-Zip: JACKSONVILLE, FL 32254

Title: VP ( ) Delete  
Name: MCGHEE, LESLIE  
Address: 5255 BENNING ROAD  
City-St-Zip: JACKSONVILLE, FL 32254

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DIR. ( ) Change (X) Addition  
Name: HOWELL, CANDACE  
Address: 6705 BARTH ROAD  
City-St-Zip: JACKSONVILLE, FL 32219 DV

Title: SEC. ( ) Change (X) Addition  
Name: MCMASTER, WILLARD S  
Address: 7369 ELWOOD AVE  
City-St-Zip: JACKSONVILLE, FL 32208

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: LESLIE MCGHEE

VP

05/26/2006

Electronic Signature of Signing Officer or Director

Date