## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Jan 23, 2006 08:00 AN DOCUMENT # P03000074493 1. Entity Name **Secretary of State B B N TRUCKING CORPORATION** Principal Place of Business Mailing Address 5214 EASTWIND DR., APT. 5214 5214 EASTWIND DR., APT. 5214 ORLANDO, FL 32819 US ORLANDO, FL 32819 01122006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 54-2112929 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BARRYMORE, E. JARVIS DO NOT WRITE **5214 EAST WIND DR APT 5214** ORLANDO, FL 32819 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 or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 *U*QQQQQ394639 Trust Fund Contribution. Added to Fees 01/26/06-80018-013 150.00 10. OFFICERS AND DIRECTORS JARVIS, BARRYMORE MARKE STREET ADDRESS 5214 EASTWIND DRIVE ORLANDO, FL 32819 CITY-ST-ZIP TITLE NAME BARRYMORE, E. JARVIS STREET ADDRESS 5214 EAST WIND DR CITY-ST-ZIP ORLANDO, FL 32819 MARKE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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: 2

CITY-ST-ZIP

an

Daytime Phone #