

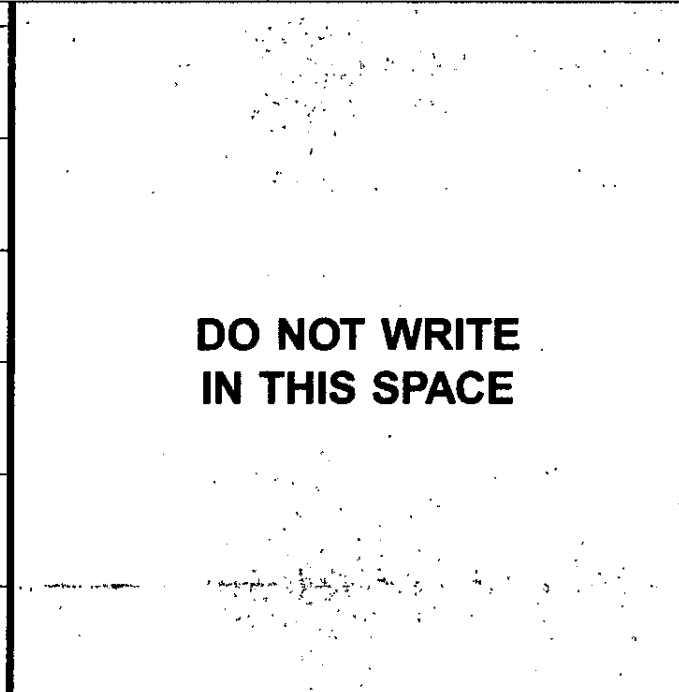


FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000109533 1. Entity Name LUCKHAM TRUCKING, INC.				Apr 28, 2008 08:0 Secretary of Sta	
Principal Place of Business 7207 SW 4TH STREET NORTH LAUDERDALE, FL 33068		Mailing Address 7207 SW 4TH STREET NORTH LAUDERDALE, FL 33068			
DO NOT WRITE IN THIS SPACE				04242008 No Chg-P CR2E034 (11/05)	
				4. FEI Number 36-4540618	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LUCKHAM, SEAN A 6524 NW 24TH COURT APT.# A MARGATE, FL 33063				DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP		P LUCKHAM, SEAN A 7207 SW 4TH ST NORTH LAUDERDALE, FL 33068			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		DT LUCKHAM, SEAN A 7207 SW 4TH STREET NORTH LAUDERDALE, FL 33068			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		VPDS LUCKHAM, DAWNETTE F 7207 SW 4TH STREET NORTH LAUDERDALE, FL 33068			
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
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: <u>Sean A. Luckham</u>		4/24/08 954-691-6405			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			