9/14/2005-90002-016-$550.00-$550.00

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
05 OCT 24 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
000066785

DOCUMENT # P03000114336

1. Entity Name
CONTRERAS BROTHERS TRUCKING INC.

| Principal Place of Business | Mailing Address |
|---|---|
| P.O. BOX 506<br>ZEPHRYHILLS, FL 33539 | P.O. BOX 506<br>ZEPHRYHILLS, FL 33539 |

DO NOT WRITE IN THIS SPACE

09072005 No Chg-P CR2E034 (10/03)

4. FEI Number
55-0848383
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CONTRERAS, JUAN
8722 WIRE RD
ZEPHRYHILLS, FL 33540

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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 _____ DATE

Signature, type or printed name of registered agent and title if applicable (If CF Registered Agent signature required when applicable)

FILE NOW!! FEE IS $550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | P |
| NAME | CONTRERAS, JUAN |
| STREET ADDRESS | 8722 WIRE ROAD |
| CITY-ST-ZIP | ZEPHRYHILLS, FL 33540 |
| TITLE | VP |
| NAME | CONTRERAS, JOSE |
| STREET ADDRESS | 8722 WIRE ROAD |
| CITY-ST-ZIP | ZEPHRYHILLS, FL 33540 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

REINSTATEMENT 05

Received OCT 27 2005

Reports OCT

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Juan C. Contreras 10-10-2005

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date

Juan C. Contreras