## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 19, 2006 8:00 am Secretary of State

1. Entry Name DJM TRUCKING , INC.								04-19-2	:006 901	.00 02	·/ ***I:	50.00
Principal Place of Business			Mailing Address						• •	v		
212 JAYVIEW AVE LEHIGH ACRES, FL 33936			PO BOX 2014 LEHIGH ACRES, FL 33970									
Principal Place of Business     3. Mailing Address												
1012 Chapel Ave.			1012 Chapel Ave.				DDIAD FIJIF DDII DE				#   <b>                                  </b>	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04022006	Chg-P	CF	R2E034	(11/05)	
City & State Lenigh Acres, Fl			Lehigh Acres, Fl				4. FEI Number 32-009				<b>→</b>	oplied For of Applicable
	Zip Country 33971 US		33971	Zip Count 33971 US			5. Certificate	of Status Desir	ed 🗀		3.75 Add e Require	
Name and Address of Current Registered Agent					Name		7. Name and	Address of N	ew Registe	ered Age	ent	
THOMAS, DEVON												
212 JAYVIEW AVE LEHIGH ACRES; FL 33936					Street Ac 1012	dress (P Chape	P.O. Box Number 1 Ave.	er is Not Accep	itable)			· · · · · · · · · · · · · · · · · · ·
· -					City					FL	Zip Cod	
8. The above	named entity	y submits this statement fo	or the purpose of changing its	register	Lehig ed office or	h Ac: registere	res ed agent, or bot	h, in the State of			339 illiar with.	71 and accept
the obligat	tions of regist	ered agent.										i
SIGNATURE Signature. Hyped or printed name of registered agent and title diapplicable (NOTE: Registered Agent signature require)										-4-00	<u> </u>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.						<b>A</b> -						
							00 May Be d to Fees					
After M	ay 1, 2006		Trust Fund Cont	ribution.			d to Fees	CHANGES TO	OFFICERS			S IN 11
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12. I nereby 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: DEVOY Thomas President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-06

239-292-1336

Daytime Phone #