2008 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT **FILED** Apr 28, 2008 08:00 AN Secretary of State **DOCUMENT # P03000123928** 1. Entity Name P.H.D. HAULING, INC. Principal Place of Business Mailing Address 1389 75TH AVENUE NORTH 1389 75TH AVENUE NORTH ST. PETERSBURG, FL 33702 ST. PETERSBURG, FL 33702 CR2E034 (11/05) 04212008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 43-2033060 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent PERKINS-MORGAN, CANDIE DO NOT WRITE 1389 75TH AVENUE NORTH ST. PETERSBURG, FL 33702 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 000000927575 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 05/20/08-80106-021 150.00 10. OFFICERS AND DIRECTORS TITLE NAME PERKINS-MORGAN, CANDIE STREET AODRESS 1389 75TH AVE NORTH CITY-ST-ZIF SAINT PETERSBURG, FL 33702 VΡ TITLE MORGAN, DENNIS J NAME STREET ADDRESS 1389 75TH AVE NORTH CITY-ST-ZIP SAINT PETERSBURG, FL 33702 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE 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 attachpront with an address, with all other like empowered.

SIGNATURE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14.2508 + 528-291