

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000124387

FILED
Jul 27, 2006
Secretary of State**Entity Name:** BULLDOG TRUCKING ENTERPRISES, INC.**Current Principal Place of Business:**1315 EL PARDO DR
TRINITY, FL 346557044**New Principal Place of Business:****Current Mailing Address:**1315 EL PARDO DR
TRINITY, FL 346557044**New Mailing Address:****FEI Number:** 56-2410534**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MANSFIELD, ROBERT E
1315 EL PARDO DR
TRINITY, FL 34655 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** DPS () Delete
Name: MANSFIELD, ROBERT E
Address: 1315 EL PARDO DR
City-St-Zip: TRINITY, FL 34655**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** V.P. () Change (X) Addition
Name: MANSFIELD, MICHAEL K
Address: 3700 ROSEWATER DR.
City-St-Zip: HOLIDAY, FL 34691

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT E. MANSFIELD

DSP

07/27/2006

Electronic Signature of Signing Officer or Director_____
Date