## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 27, 2005 08:00 AN Secretary of State DOCUMENT # P03000137071 JAY PALL TRUCKING, INC. Principal Place of Business Mailing Address 4770 ESTECO COURT 4770 ESTECO COURT ESTERO, FL 33928 **ESTERO, FL 33928** No Chg-P CR2E034 (10/03) 01242005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 81-0639305 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PALL, JAY DO NOT WRITE 4770 ESTECO COURT ESTERO, FL 33928 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PSTD TITLE PALL, STEPHEN J NAME STREET ADDRESS 4770 ESTECO COURT ESTERO, FL 33928 CITY-ST-ZIP TITLE operation of the second of the NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-SI-ZIP IN THIS SPACE NAME STREET ADDRESS CITY+ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby 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 ampowered 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:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR