

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2007 8:00 am
Secretary of State

03-16-2007 90034 022 ***150.00

DOCUMENT # P03000143588
 1. Entity Name
 PARKS TRUCKING, INC.



Principal Place of Business
 4296 KIRKLAND BLVD
 ORLANDO, FL 32811

Mailing Address
 P.O. BOX 682822
 ORLANDO, FL 32868

20007405



02262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0444587	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PARKS, HECTOR M
 4296 KIRKLAND BLVD
 ORLANDO, FL 32811

*2405 N-HASTING ST
 ORLANDO FL
 32808*

DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating)
 Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARKS, HECTOR M P.O. BOX 682822 ORLANDO, FL 32868
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

My Principal Place of Business has been change TO 2405 N-HASTING ST ORLANDO FL 32808

My MAIL Address IS TO REMAIN the SAME.

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 attachment with an address, with another like empowered.

SIGNATURE: *Hes* _____ Date: *03-07-07* Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR