## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 17, 2006 08:00 AM Secretary of State DOCUMENT # P04000040670 1. Entity Name ROGERS VAN LINES, INC Principal Place of Business Malling Address 2000 NORTH WEST 30 AVENUE 2000 NORTH WEST 30 AVENUE FORT LAUDERDALE, FL 33311 FORT LAUDERDALE, FL 33311 No Chg-P 02082006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0809254 Not Applicat! \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent ROGERS, JEFFREY DO NOT WRITE 2000 NORTH WEST 30 AVENUE FORT LAUDERDALE, FL 33311 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 lamitlar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstalling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME ROGERS, JEFFREY STREET ADDRESS 2000 NORTH WEST 30 AVENUE FORT LAUDERDALE, FL 33311 CITY-ST-ZIP TITLE U00000438468 NAME 03/01/06-80008-003 (**50.0**0 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 118, 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 cath; 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:

NAME STREET ADDRESS C/TY-ST-ZIP

HIGH AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR ORIGINATOR

2/13/06 (754) 264-5367

FILED