## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

## **FILED** Apr 13, 2006 8:00 am Secretary of State

04-13-2006 90297 001 \*\*\*150.00

## **DOCUMENT # P04000068874**



50011550

Not Applicable

MOTORCOACH CLASS "A" TRANSPORTATION, INC.

Mailing Address 7041 GRAND NATIONAL DR 7041 GRAND NATIONAL DR STE # 111 SUITE # 111 ORLANDO, FL 32819 ORLANDO, FL 32819

•				<b>i</b>	8 8 13 1 <b>8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1 8 3 1</b>	
Principal Place of B 9663	usiness BACHMAN	Rd 3. Mailing Address 9663	BACHMAN	ed IIIIIIIIII		
Suite, Apt. #, etc.	A	Suite, Apt. #, etc.		04102006	Chg-P	CR2E034 (11/05)
City & State	4 - 1	City & State	_	4. FEI Number		Applied For

4. FEI Number "ONLANDO, PC 20-1103989 6. Name and Address of Current Registered Agent

\$8.75 Additional 5. Certificate of Status Desired Fee Required

7. Name and Address of New Registered Agent GIANNINI

DE PAULA, RAMON RABELLO 7041 GRAND NATIONAL DR STE # 111 ORLANDO, FL 32819

Principal Place of Business

2.

9663 BACHMAN RCL

Street Address (P.O. Box Number is Not Acceptable)

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 V- MMM the obligations of registered agent. 11/10/06

SIGNATURE.	Signature, typed or printed name of registered agent and title	DATE						
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  Trust Fund Contribution  9. Election Campaign Financing Trust Fund Contribution  Added to Fees								
10.	OFFICERS AND DIREC	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIANNINI, ROGERIO Z 7041 GRAND NATIONAL DR - STE# ORLANDO, FL 32819	☐ Delote	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROGENIO G 9663 BAC ONLANDO I	HAMN Rol PC 32824	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE PAULA, RAMON RABELLO 7041 GRAND NATIONAL DR - STE # ORLANDO, FL 32819	□ Dolete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9663 BAC	HMM Rd 2 32824	£ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE PAULA, MUCIO JR. 7041 GRAND NATIONAL DR - STE # ORLANDO, FL 32819	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9663 BAG	HMM ROL 2 32824 HMAN ROL , H 32824	€ enange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	

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 attact pent with an address, with all other like empowered.

SIGNATURE:

INTED NAME OF SIGNING OFFICER OR DIRECTOR