


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 31, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P04000094745</b> 1. Entity Name <b>J B FREIGHT INCORPORATED</b>	
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Principal Place of Business <b>18555 SW 295 TERR HOMESTEAD, FL 33030</b>	Mailing Address <b>18555 SW 295 TERR HOMESTEAD, FL 33030</b>
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**DO NOT WRITE IN THIS SPACE**



07202006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-1268327</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>PEREZ, RAUL 18555 SW 295 TERR HOMESTEAD, FL 33030</b>
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**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PEREZ, RAUL 18555 SW 295 TERR HOMESTEAD, FL 33030
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ARDITE, ANA 18555 SW 295 TERR HOMESTEAD, FL 33030
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PEREZ, RAUL JR 18555 SW 295 TERR HOMESTEAD, FL 33030
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BERMUDEZ, JOSE 18555 SW 295 TERR HOMESTEAD, FL 33030
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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08/01/06-80009-009 558.75

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 all other life empowered.

**SIGNATURE:** *Jose R. Bermudez* **07-18-06** **(586) 412-2841**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #