## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000097409

Entity Name: ACOSTA HAULING, INC.

FILED May 02, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16113 COPPERFILED DR 17731 AYRSHIRE BLVD TAMPA, FL 33618 LAND O LAKES, FL 34638

Current Mailing Address: New Mailing Address:

16113 COPPERFILED DR 17731 AYRSHIRE BLVD TAMPA, FL 33618 LAND O LAKES, FL 34638

FEI Number: 20-1295348 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ACOSTA, ZENIA

16113 COPPERFILED DR

TAMPA, FL 33618 US

ACOSTA, ZENIA

17731 AYRSHIRE BLVD

LAND O LAKES, FL 34638 US

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.

SIGNATURE: 05/02/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ACOSTA, FELIX

Address: 16113 COPPERFILED DR City-St-Zip: TAMPA, FL 33618

Title: VP ( ) Delete Name: ACOSTA, ZENIA

Address: 16113 COPPERFILED DR City-St-Zip: TAMPA, FL 33618

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition

 Name:
 ACOSTA, FELIX

 Address:
 17731 AYRSHIRE BLVD

 City-St-Zip:
 LAND O LAKES, FL 34638

Title: VP (X) Change () Addition

Name: ACOSTA, ZENIA
Address: 17731 AYRSHIRE BLVD
City-St-Zip: LAND O LAKES, FL 34638

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FELIX ACOSTA P 05/02/2007