2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000107182

1. Entity Name
CEE CEE TRUCKING INC.

Principal Place of Business

1690 VARNER COURT
BARTOW, FL 33830

Mailing Address

1690 VARNER COURT
BARTOW, FL 33830

DO NOT WRITE IN THIS SPACE

01072006   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
20-1544461		Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

COLEMAN, CLIFFORD JR
1690 VARNER COURT
BARTOW, FL 33830

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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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10.	OFFICERS AND DIRECTORS
TITLE	PVPS
NAME	COLEMAN, CLIFFORD JR
STREET ADDRESS	1690 VARNER COURT
CITY-ST-ZIP	BARTOW, 33 33830
TITLE	T
NAME	COLEMAN, CLIFFORD JR
STREET ADDRESS	1690 VARNER COURT
CITY-ST-ZIP	BARTOW, 33 33830
TITLE	
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UIN000451384
03/10/06-80050-023 150.00

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IN THIS SPACE

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 like empowered.

SIGNATURE: X _Clifford Coleman Jr._   X 2/16/06 (863)581-2130

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #