

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000108892

1. Entity Name
SDER TRUCKING INC



Principal Place of Business
219 ASHBURNE DR
ORLANDO, FL 32835

Mailing Address
219 ASHBURNE DR
ORLANDO, FL 32835

DO NOT WRITE IN THIS SPACE

**FILED
Mar 20, 2006 8:00 am
Secretary of State**

03-20-2006 90019 010 ***150.00

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03122006 No Chg-P CR2E034 (11/05)

| | |
|---|---|
| 4. FEI Number 41-2147170 | Applied For <input type="checkbox"/> |
| 5. Certificate of Status Desired <input type="checkbox"/> | |
| \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

SADEO, PURAN B.R.
219 ASHBURNE DR
ORLANDO, FL 32835

**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

**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 NAME STREET ADDRESS CITY-ST-ZIP | PTS SADEO, PURAN B.R. 219 ASHBURNE DR ORLANDO, FL 32835 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| DO NOT WRITE 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: *P. R. Sadeo* PURAN B.R. SADEO 3/15/06 321-239-7026
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #