
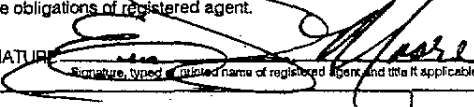



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000110146		
1. Entity Name INTEGRITY REVOLUTION TRUCKING, INC.		
Principal Place of Business 704 125TH AVE. TAMPA, FL 33612	Mailing Address P.O. BOX 291258 TAMPA, FL 33687	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MOORE, EVELYN B 704 125TH AVE. TAMPA, FL 33612		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  (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE <u>4-29-06</u>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MOORE, MORRIS L P.O. BOX 291258 TAMPA, FL 33687	DO NOT WRITE IN THIS SPACE U000000563866 05/20/06-80031-005 150.00 U000000563866 05/20/06-80031-006 8.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MOORE, EVELYN B P.O. BOX 291258 TAMPA, FL 33687	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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  EVELYN MOORE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>4-29-06</u> Daytime Phone # <u>813-789-5379</u> <u>813-672-7793</u>