


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jun 12, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90216 017 \*\*\*150.00

<b>DOCUMENT # P04000137145</b> 1. Entity Name <b>PAUL PERSAUD TRUCKING, INC.</b>																													
Principal Place of Business <b>14801 RANDOLPH COURT FT MYERS FL 33905</b>			Mailing Address <b>14801 RANDOLPH COURT FT MYERS FL 33905</b>																										
2. Principal Place of Business		3. Mailing Address																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																											
City & State		City & State																											
Zip	Country	Zip	Country																										
6. Name and Address of Current Registered Agent  <b>PERSAUD, SREEMATTIE 14801 RANDOLPH COURT FT MYERS FL 33905</b>				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ <b>FL</b> Zip Code _____																									
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 <u><i>Sreemattie Persaud</i></u> DATE <u>4/19/06</u> <small>Signature, typed or printed name of registered agent and title is applicable (NOTE: Registered Agent signature required when reappointing)</small>																													
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">DPST</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>PERSAUD, DHANPAUL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>14801 RANDOLPH COURT</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>FT MYERS FL 33905</td> <td></td> </tr> </table>			TITLE	DPST	<input type="checkbox"/> Delete	NAME	PERSAUD, DHANPAUL		STREET ADDRESS	14801 RANDOLPH COURT		CITY- ST- ZIP	FT MYERS FL 33905		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;"></td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY- ST- ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 <u><i>Dhan Paul Persaud</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>4/19/06</u> Daytime Phone # <u>239-633-9536</u>																									