

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

May 31, 2005 8:00 am
Secretary of State

04-27-2005 90318 019 ***150.00

DOCUMENT # P04000138299

1. Entity Name
PINERO'S TRUCKING SERVICES INC



Principal Place of Business
7645 W 16 CT
HIALEAH FL 33014
US

Mailing Address
PO BOX 4038
HIALEAH FL 33014
US

2. Principal Place of Business
2985 18 AVE SE
Suite, Apt. #, etc.

3. Mailing Address
2985 18 AVE SE
Suite, Apt. #, etc.

City & State
Naples, FL

City & State
Naples, FL 34117

Zip
34117

Country
Collier

Zip
34117

Country
Collier



1st MOORE CR2E034 (10/04)

6. Name and Address of Current Registered Agent
PINERO, JORGE
7645 W 16 CT
HIALEAH FL 33014

4. FEI Number
20-1694343

Applied For
☐ Not Applicable

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

7. Name and Address of New Registered Agent
Name
JORGE PINERO
Street Address (P.O. Box Number is Not Acceptable)
2985 18 AVE SE
City
Naples FL Zip Code
34117

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]* (NOTE: Registered Agent signature required when renewing) DATE 3-19-05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PINERO, JORGE PO BOX 4038 HIALEAH FL 33014 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 2985 18 AVE SE NAPLES, FL 34117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PINERO, MARLENE PO BOX 4038 HIALEAH FL 33014 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 2985 18 AVE SE NAPLES, FL 34117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PINERO, MARLENE PO BOX 4038 HIALEAH FL 33014 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 2985 18 AVE SE NAPLES, FL 34117
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 *[Signature]* DATE 3-19-05 (305) 336-8550
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR