## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000020462

**Entity Name: DACRES TRUCKING INC** 

FILED Mar 29, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

901 S. STATE RD 7., SUITE PH 400 901 S. STATE RD 7., SUITE PH 400 HOLLYWOOD, FL 33023

400PH

HOLLYWOOD, FL 33023

**Current Mailing Address: New Mailing Address:** 

901 S. STATE RD 7., SUITE PH 400 901 S. STATE RD 7., SUITE PH 400 HOLLYWOOD, FL 33023

400PH

HOLLYWOOD, FL 33023

FEI Number: 41-2164791 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

DACRES, THEANIE DACRES, THEANIE 5067 SW 137TH TERRACE 5067 SW 137TH TERRACE MIRAMAR, FL 33023 MIRAMAR, FL 33027

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.

SIGNATURE: THEANIE DACRES 03/29/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

( ) Delete

() Delete

() Delete

## **OFFICERS AND DIRECTORS:**

DACRES, THEANIE

5067 SW 137TH TERR

MIRAMAR, FL 33023

DACRES, OTHENEIL

5067 SW 137TH TERR

MIRAMAR, FL 33023

HUNTER, MONICA

5067 SW 137TH TERR

MIRAMAR, FL 33023

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition DACRES, THEANIE Name:

5067 SW 137TH TERR Address: City-St-Zip: MIRAMAR, FL 33027

Title: (X) Change ( ) Addition

Name: DACRES, OTHENEIL 5067 SW 137TH TERR Address: MIRAMAR, FL 33027 City-St-Zip:

Title: (X) Change ( ) Addition

HUNTER, MONICA Name: 5067 SW 137TH TERR Address: City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MONICA HUNTER D 03/29/2006