## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000044767

Entity Name: F&F SOUZA TRUCKING INC.

FILED Aug 29, 2007 Secretary of State

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

589 SW LACROIX AVE 856 SW CANARY TERR
PORT ST LUCIE, FL 34953 PORT ST LUCIE, FL 34953 US

Current Mailing Address: New Mailing Address:

589 SW LACROIX AVE 856 SW CANARY TERR PORT ST LUCIE, FL 34953 US

FEI Number: 20-2561088 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TAX HOUSE CORPORATION

1261 E SAMPLE RD

POMPANO BEACH, FL 33064 US

SOUZA, FABIANO B

856 SW CANARY TERR

PORT ST LUCIE, FL 34953 US

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: FABIANO B SOUZA 08/29/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 SOUZA, FABIANO B
 Name:
 SOUZA, FABIANO B

 Address:
 589 SW LACROIX AVE
 Address:
 856 SW CANARY TERR

 City-St-Zip:
 PORT ST LUCIE, FL 34953
 City-St-Zip:
 PORT ST LUCIE, FL 34953 US

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

Name: SOUZA, FABIOLA D Name: SOUZA, FABIOLA D Address: 589 SW LACROIX AVE Address: 856 SW CANARY TERR
City-St-Zip: PORT ST LUCIE, FL 34953 City-St-Zip: PORT ST LUCIE, FL 34953 US

I hereby certify that the information supplied with this filing does not qualify 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: FABIANO SOUZA PD 08/29/2007