2006 FUK PKUFII GUKPUKÁTIUN **ANNUAL REPORT**

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NAME OF SIGNING OFFICER OR DIRECTOR

Mar 31, 2006 8:00 am Secretary of State **DOCUMENT # P05000059475** 03-20-2006 90013 045 ***150.00 JESSE RIKER TRANSPORT, INC. Principal Place of Business Mailing Address 4288 PANDORA RD 4288 PANDORA RD **66666769** VENICE, FL 34293 VENICE, FL 34293 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Act. #, etc. 03152006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 40-0238151 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RIKER, JESSE 4288 PANDORA RD Street Address (P.O. Box Number is Not Acceptable) VENICE, FL 34293 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 Flonds. I am familiar with, and account the obligations of registered agent SIGNATURE. 3-15-200 Co (NOTE: Registered Agent signature required when reinstaling) FILE NOW!!! FEE !S \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May 80 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE President ☐ Delete TITLE NAME JESSE STREET ADDRESS 4288 Pandora STREET ADORESS CITY-ST-ZIP 34293 CITY-ST-ZIP TITLE Oelete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ■ Addation NAME MALE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P TITLE Delete NTLE ☐ Chance Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete ☐ Channe ☐ Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAVE STREET ADORESS STREET ADORESS CITY-ST-71P 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 eath; 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 charged, or on an attachment with an address, with all piper like empowered.

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