## FILED May 03, 2006 8:00 am Secretary of State

2000	ANN		REPO	HOR
18 45 8 13	- 4 DAEAA	0420	107	

DOCUMENT # P05000138107  1. Entity Name PLANT & EARTH TRUCKING INC						05-03-2006 9	0235 009	) ***150	.00
Principal Place of Business 7187 THOMPSON ROAD BOYNTON BEACH, FL 33426		Mailing Address 7187 THOMPSON ROAD BOYNTON BEACH, FL 33426				• .			
Principal Place of Business     3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03162006	Chg-P	CR2E0:	34 (11/05)	
City & State		City & State			4. FEI Numb	o <del>e</del> r	··	<del></del>	oplied For
Zip	Country	Zip	Coun	try	5. Certificate	of Status Desired		\$8.75 Ad	ditional
	6. Name and Address of Currer	nt Registered Agent		Name	7. Name and	d Address of New R			
HUCKABY, KEN 7187 THOMPSON ROAD BOYNTON BEACH, FL 33426				Street Address (P.O. Box Number is Not Acceptable)					
				City			FL	Zip Coo	le
8. The above the obligat	named entity submits this statement ions of registered agent.					oth, in the State of Flo	orida. I am f	amiliar with	and accept
	Signature, typed or printed name of registered age	nt and title if applicable. (NO	TE: Registered	d Agent signature required	d when reinstating)	T	DATE		
FIL After Ma	E NOW!!! FEE IS \$150.00 by 1, 2006 Fee will be \$550	9. Election Campa Trust Fund Con			.00 May Be led to Fees				
10.	OFFICERS AN		11.		ADDITIONS	/CHANGES TO OFF	ICERS AND		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HUCKABY, KEN 7187 THOMPSON ROAD BOYNTON BEACH, FL 33426	☐ Delete		l l				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		l l				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		J			.,,	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY-	ET ADDRESS ST-ZIP				Change	Addition
of the corp	ertify that the information supplied wi on this report or supplemental report poration or the receiver or trustee em or on an attachment with an address	is true and accurate and that i powered to execute this report	my signati t as requir	ure shall have the seed by Chapter 607	same legal effe 7, Florida Statuti	ct as if made under o es; and that my name	ath; that I ar appears in	n an officer Block 10 of	or director Block 11 if
SIGNAT	URE: Kon H	PRINTED NAME OF SIGNING OFFICER	OR DIRECT		-3/-06	50 Date	6/- 64 <u>-</u>	) - 4/6 o	20