2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000009943

OGLE, TRAVIS

MILTON, FL 32571

4364 BAYOU RIDGE DR.

Name:

Address:

City-St-Zip:

Entity Name: BOSTON BLACKIE TRUCKING, INC.

FILED Jan 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4364 BAYOU RIDGE DR. MILTON, FL 32571 **Current Mailing Address: New Mailing Address:** 4364 BAYOU RIDGE DR. MILTON, FL 32571 FEI Number: 42-1692193 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: SMALLBIZ AGENTS, LLC OGLE, TRAVIS PRES 4364 BAYOU RIDGE DR. 4244 W. TENNESSEE STREET #185 MILTON, FL 32571 TALLAHASSEE, FL 32304 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: TRAVIS OGLE 01/09/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete Title: () Change () Addition OGLE, TRAVIS Name: Name: 4364 BAYOU RIDGE DR. Address: Address: City-St-Zip: MILTON, FL 32571 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: OGLE, LUZ A Name: 4364 BAYOU RIDGE DR. Address: Address: MILTON, FL 32571 City-St-Zip: City-St-Zip: Title: Title: SEC () Delete SEC (X) Change () Addition OGLE, ANDY OGLE, LUZ A Name: Name: 4364 BAYOU RIDGE DR. 4364 BAYOU RIDGE DR. Address: Address: City-St-Zip: MILTON, FL 32571 City-St-Zip: MILTON, FL 32571 Title: TREA () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: TRAVIS OGLE **PRES** 01/09/2007