2008 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED Jan 14, 2008 08:00 A **DOCUMENT # P06000087990 Secretary of State** 1. Entity Name STEVE ALLEN TRUCKING, INC. Principal Place of Business Mailing Address 2895 N. TIVOLI ROAD 2895 N. TIVOLI ROAD AVON PARK, FL 33825 AVON PARK, FL 33825 01042008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-5152659 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent ROBERT E. LIVINGSTON, P.A. DO NOT WRITE 445 SOUTH COMMERCE AVENUE SEBRING, FL 33870 IN THIS SPACE 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 Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent aignature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PD TILE ALLEN, STEVEN C NAME 2895 N. TIVOLI ROAD STREET ADDRESS CTTY-ST-ZIP AVON PARK, FL 33825 STD 000000784082 01/16/08-80041-023 158.75 ALLEN, JACKIE A NAME STREET ADDRESS 2895 N. TIVOLI ROAD CITY-ST-ZIP AVON PARK, FL 33825 TITLE NUME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TIN F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET AODRESS CITY-ST-ZIP . 12. I hereby certify that the information supplied with this filling 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 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 in Block 10 or Block 11 if

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