

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P06000136588

1. Entity Name
P & A HAULING, INC.



FILED
Jul 29, 2008 08:00 AM
Secretary of State

Principal Place of Business
1922 GLEN MEADOWS CIRCLE
MELBOURNE, FL 32935

Mailing Address
1922 GLEN MEADOWS CIRCLE
MELBOURNE, FL 32935



07262008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|---|-------------------------------|
| 4. FEI Number 20-5899454 | Applied For Not Applicable |
| 5. Certificate of Status Desired <i>APR</i> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

NOBS, PATRICK
1922 GLEN MEADOWS CIRCLE
MELBOURNE, FL 32935

**DO NOT WRITE
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: *Anne Nobs*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/1/08
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees.

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD NOBS, ANNE 1922 GLEN MEADOWS CIRCLE MELBOURNE, FL 32935 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD NOBS, PATRICK 1922 GLEN MEADOWS CIRCLE MELBOURNE, FL 32935 |
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000000956638
07/29/08-80003-012 150.00

000000956638
07/29/08-80003-013 8.75

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE: *Anne Nobs*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/1/08